



WE CONNECT

The Official Publication of WPF

THEME “WE CARE”



2ND ISSUE

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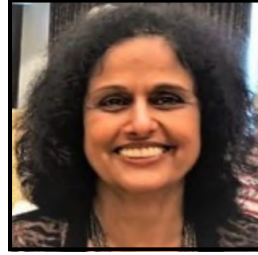
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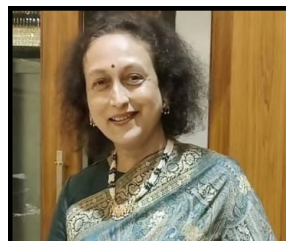
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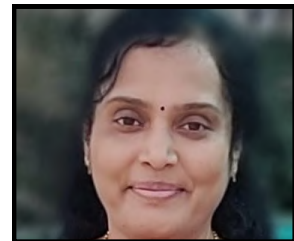
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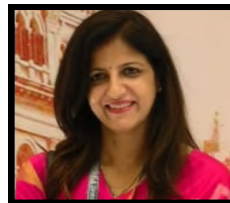
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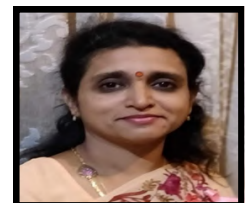
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EDITORIAL

Dear Readers,

The theme of the 2nd issue of We Connect is 'We Care'. We begin with an engaging description of our logo by chairperson, Dr Sangita Lodha which denotes foundational values of our organization- 'selfless caring'. This issue has an interesting amalgamation of theme-based articles that range from caring about holistic wellbeing to metabolic health and digital wellness. These motivate us towards health in all its dimensions- physical, mental, social, spiritual and digital. Award winning moviemaker Prachee Banjania shares her life story of nurturing care and connections in the personal and the reel worlds.

This is followed by the awesome professional journeys of the icons - Dr Susan Sawyer and Ritu Vyas. We are proud of our young professionals, Dr Nimrat Sandhu and Dr Vaishnavi Iyengar who raise the bar by their contributions to the community and research. Their articles are worth a read. We are honored receive the pearls of wisdom in this issue by the epitome of knowledge and grace, Dr Mridula Phadke. Our fun with creativity section features art by the very talented Dr Sarvmangala and reality bytes by a prolific writer, Dr Mridula Basavaraj. We also have a column from Padmshri Dr. Pukhraj Bafna a Pediatrician who has penned a powerful message urging women to take charge of their own safety and empowerment.

As always, the youth section shines with vibrance and brilliance. Here, Avieshai, a liver transplant recipient shares a story of resilience and strength. We also introduce our dynamic youth editorial board ranging from ages 18 to 24 years from different parts of the country from different spheres of life- medicine, management and literature. Read on to get amazed!

We gratefully acknowledge our Digital Technical Partner Sunita Amilyar for her invaluable assistance in the successful publication of this journal.

We truly believe in the anthropologist Margaret Mead's quote:

'Never believe that a few caring people can't change the world. For, indeed, that's all who ever have.'
Let's change the world- let's do it together- with love and by caring for all the living beings and the Mother Earth !

Dr Preeti Galagali, Dr Himabindu Singh, Dr Poonam Bhatia

On behalf of Team Editorial Board We Connect

wpfmagazine@gmail.com



MESSAGE FROM CHAIRPERSON ABOUT LOGO OF WPF

DR. SANGITA LODHA



Hello Everyone, I am happy to release 2nd issue of “We Connect” The Official Publication of WPF. Through this issue I would like to share the details of our Logo. The logo of WPF transcends mere symbolism; it embodies profound meanings that resonate deeply with the journey towards independence and self-worth.

Let us understand the various elements one by one. The very first element is wing which symbolize embarking on a transformative odyssey of self-empowerment and discovery. This journey urges individuals to uncover and embrace the silent power within, emphasizing not just breaking away from constraints, but breaking through to realize personal happiness and fulfilment.

Central to the logo's design is the concept of self-realization and emotional intelligence, encouraging individuals to be their own guides and enhance their emotional strength. It envisions a life where one shapes their destiny actively, not merely playing roles but taking the lead in their own narrative. Each choice splashes the canvas of life with the vibrant colors of mind, body, and soul.

The logo also celebrates the rise of 'unseen wings,' symbolizing growth and inspiration, becoming a beacon for others. It invites all to join in a journey towards promise and solidarity, embracing evolution together.

The inclusion of a baby symbolizes love, security, and the future generation, while the jasmine flower represents uniqueness, simplicity, love, and sensuality. Known as the "Queen of fragrance," jasmine symbolizes purity and modesty, spreading happiness and positivity wherever it goes.

The combination of pink and blue in the logo signifies gender equality, rejecting biases and fostering compassion and acceptance. Pink, symbolizing compassion, and playfulness, & complements blue, which represents serenity and trust, creating a balanced and inclusive palette.

In essence, the logo of the Women Pediatricians Forum (WPF) is a complete representation of compassion, love, femininity, and empowerment. It encapsulates warmth, kindness, and emotional depth, making it a perfect symbol for the forum's ethos and aspirations.

I congratulate, our hard working Editorial team lead by Dr Preeti Galagali, Dr Himabindu Singh and Dr Poonam Bhatia for bringing out the journal which not only includes academics but includes non-academic facets of our fellow Paediatricians.

THEME BASED



Dr. Rupal Dalal

MD IBCLC FABM
Adjunct Associate
Professor, CTARA
IIT Bombay

Applied Nutrition Science and Metabolic Health –

What We Missed in Medical College

The Indian Council of Medical Research–India Diabetes (ICMR-INDIAB) study is the largest cross-sectional, population-based survey of adults aged 20 years and older on diabetes and other metabolic NCDs undertaken in India, and covers all 28 states, two of the union territories, and the National Capital Territory of Delhi which just got published in lancet in June 2023.

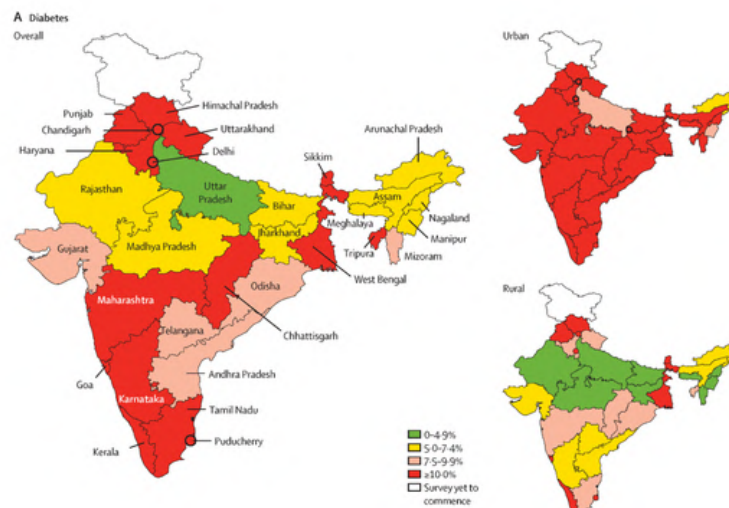
1,13,043 individuals (33,537 from urban areas and 79,506 from rural areas) participated in the study. It highlighted the enormous burden of NCDs faced by India. The survey showed the prevalence of diabetes and prediabetes in India to be 101 million and 136 million, respectively (Fig: 1). The presence of Dyslipidemia in more than 80% (Fig:2), Hypertension in more than one-third (nearly two-thirds if

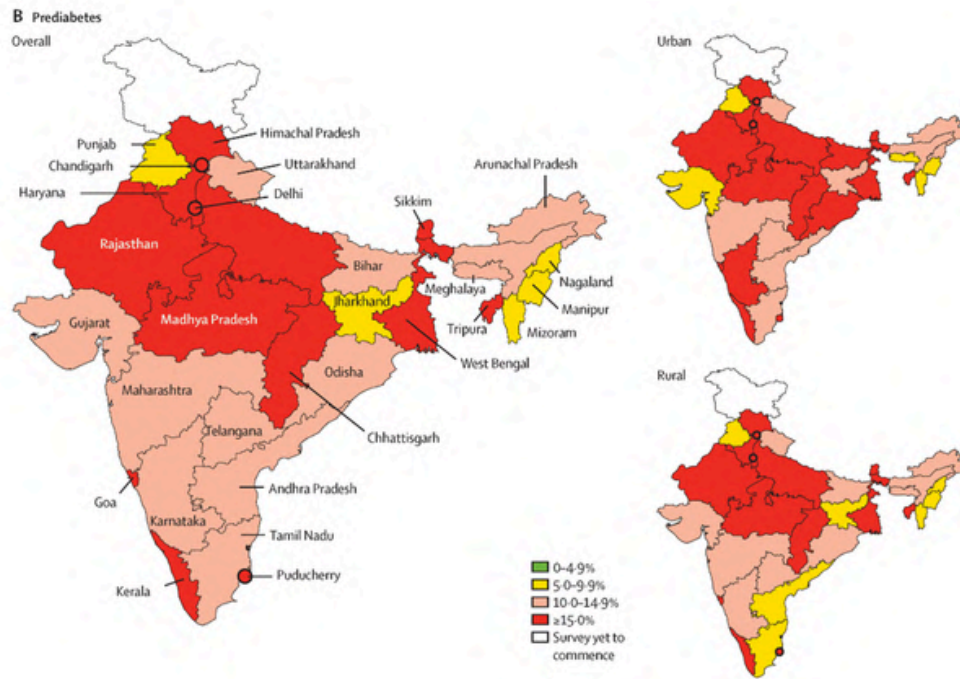
the ACC/AHA criteria are used), and Obesity in nearly a third of the population. It is of interest that low HDL cholesterol accounted for most of the dyslipidemia burden in the country, with an overall prevalence of 66.9%.

The state-wise weighted prevalence of hypertension ranged from 24.3% to 51.8%, generalized obesity from 11.6% to 53.3%, and abdominal obesity from 18.4% to 61.2% (Fig:3), Weighted prevalence of hypertriglyceridemia was from 21.2% to 47.9%.

This level of numbers will create a huge burden on our economy especially since huge number of prediabetics are being diagnosed in rural India where people use public health infrastructure funded by government. It is imperative that we understand the root causes and pass on the knowledge and awareness to the public at large to avoid this tsunami of metabolic diseases. It is also important to diagnose these patients early on before blood glucose starts rising or patient gets diagnosed with hypertension as earlier we start, easier it gets to put the diseases into remission.

Fig: 1 Overall and area-wise weighted prevalence of diabetes and prediabetes





Overall and area-wise weighted prevalence of Hypertension, Generalised obesity, and Abdominal Obesity Projections for metabolic disease prevalence in India

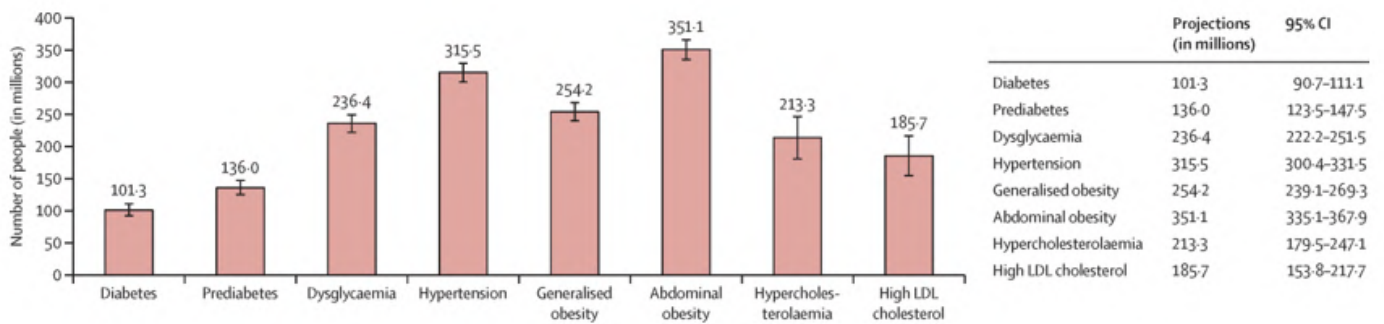


Fig 2: Overall and area-wise weighted prevalence of Hypertriglyceridaemia, Low HDL cholesterol,

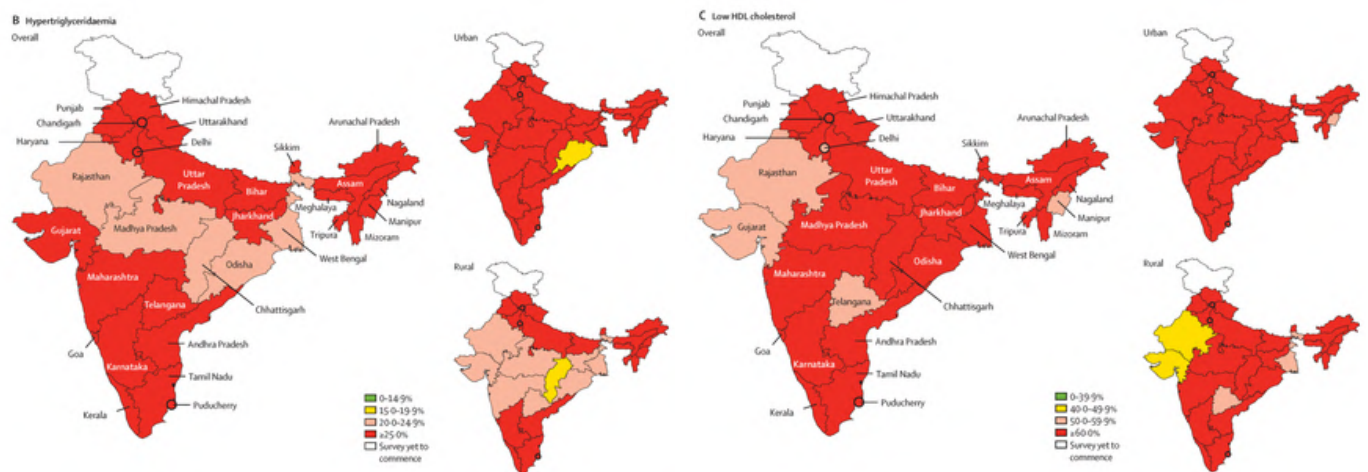
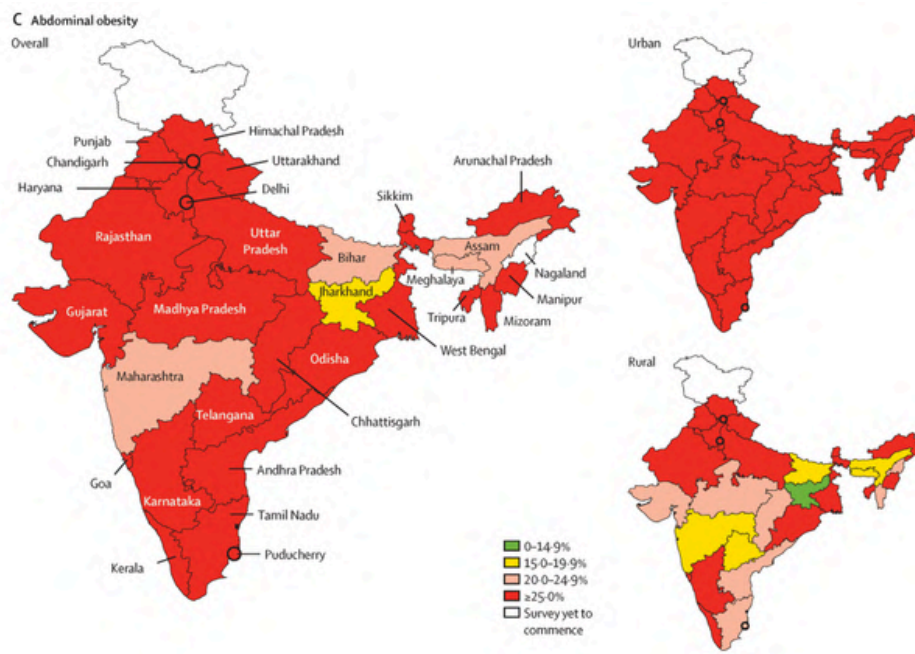
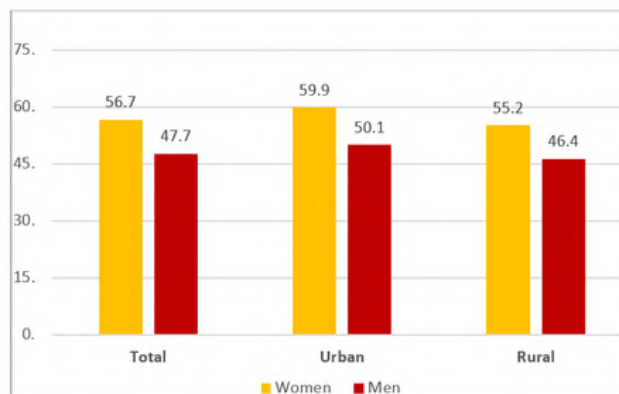


Fig 3: Overall and area wise weightage prevalence of Abdominal Obesity

NFHS5 data also showed 56.7% women and 47.7% men to have high waist to hip ratio (Fig: 4). This is the new anthropometric measurement which was carried out in the latest national survey. Fig: 5 and Fig: 6 showed state wise percentage of women and men with high waist to hip ratio.

Fig: 4 High risk Waist to Hip ratio for adults according to region (NFHS5)

The reason for explosion of metabolic syndrome is that although we went through human biology including anatomy, physiology, biochemistry but unfortunately, we didn't learn nutrition and its effect on our health in detail, as much as we learnt about disease state, pathophysiology and pharmacology. We learnt many pathological conditions such as metabolic syndrome, essential hypertension, autoimmune diseases, mental illnesses etc without understanding the root causes.

Since last few years, there are many scientific papers as well as books which are published on the remission of diabetes, hypertension, PCOD, bipolar disorders and many other diseases by changing lifestyle specifically nutrition. But to understand how proper nutrition brings us back our metabolic health, we have to go back to our basics especially at a cellular level and understand nutritional biochemistry, the subject which was despised by most of us so much.

I think the reason we found biochemistry so dry as we didn't learn the applied biochemistry when it came to metabolic health. We were intimidated by Krebs cycle, long names of enzymes involved and zillions of biochemical reactions including fat and protein metabolism. Being biology students, electron transport chain of mitochondria gave us the nightmare.

Fig: 5 High risk Waist to Hip ratio in 15-49 y women (NFHS 5)

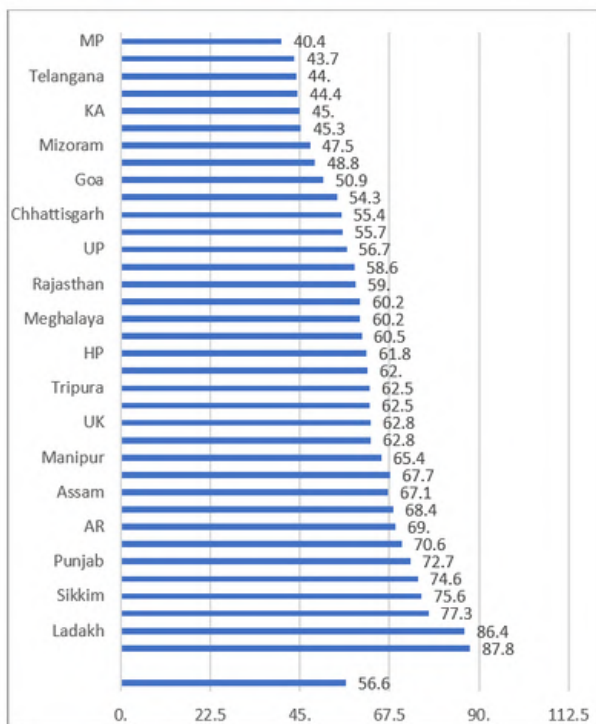
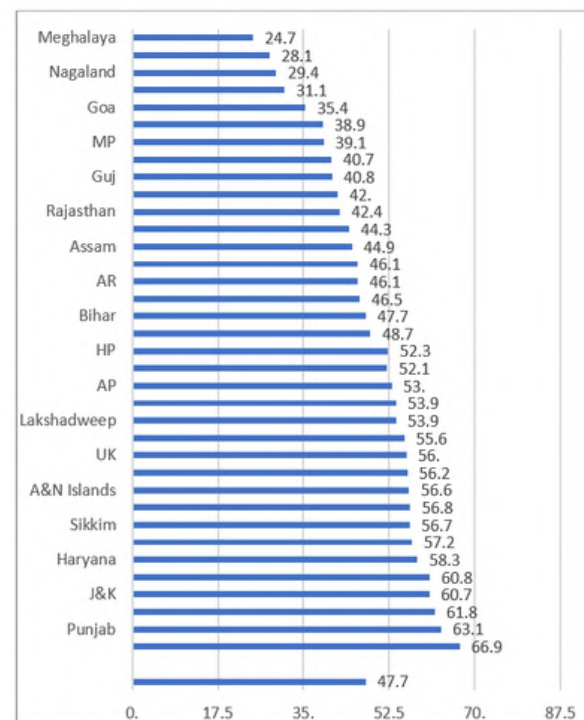


Fig: 6 High risk Waist to Hip ratio 15-49 years old men (NFHS5)



Deep diving into nutrition biochemistry literature came with my own personal experience of diagnosis of essential hypertension 7 years ago. Since there was a strong family history of hypertension in both of my parents, I always followed a strict dietary guideline, while I was in US, like having heart healthy oats or egg white breakfast, low salt foods, avoided saturated fats, used canola and olive oil, did regular exercise like yoga and swimming and followed good 8 hours of sleep hygiene, I still developed high blood pressure in 2017. During that time, I weighed around 55 kg with my height of 5'4". It was very surprising for me as I was very disciplined with my routine.

This is when I decided to take charge of my own health and learn about the root causes of essential hypertension by reading literature and following some individuals on the twitter who themselves had worked on reversing their hypertension. This is when I learnt about an elephant in the room which was one of the most important root causes of not just metabolic diseases but various other pathological conditions which I never thought were metabolic in nature. I learnt about Insulin Resistance (IR). As soon as I fixed my IR, my BP came tumbling down from 150/100 to 90/60 in about 2 weeks.

I had to increase my salt intake as per my cardiologist uncle's advice which I was very skeptical to take as I was yet afraid of salt and its link to hypertension. Nevertheless, I increased salt in my diet and my BP normalized to 110/70, and it is maintained till today.

How I learnt that it was not salt which was the root cause of my high BP, it was carbohydrate intolerance also called as insulin resistance in early stages which was raising my blood pressure. It was the beginning of my learning curve when it came to adult nutrition. Since then, I have treated 100s of patients with reversal of multitudes of diseases including type 2 diabetes, hypertension, resistant obesity with just nutrition and other lifestyle approaches.

Through series of articles in “We Connect”, I will go through the basics of applied cell biology including mitochondria, nutrition biochemistry including carbohydrate metabolism, different kinds of fats – saturated fats-unsaturated fats like omega 3s-omega 6, fat transport, cholesterol & fat metabolism, protein and it’s requirement, different kind of protein, Insulin resistance, inflammation and inflammatory markers, oxidative stress and antioxidants, what is metabolic health, what are the metabolic diseases, their root causes, applied pathophysiology of metabolic disease, the reasons for explosion of metabolic diseases, evidence based lifestyle approaches to prevent and treat metabolic diseases including various diets like Low Carbohydrate Diet, Paleo Diet, Mediterranean Diet, Fasting Mimicking Diets, Different Kind Of Fasting, Muscle Resistance Exercise, Sleep etc, latest science on Mitochondria Hacking Like Cold Baths, Autophagy, Circadian Rhythm. Various case studied will be discussed too, who overcame their medical conditions like Psoriasis, PCOD, Hypertension, Type 2 Diabetes, Edema, Arthritis, Sciatica, Prediabetes, Obesity and many other hosts of diseases.

I have been teaching these topics to engineering students at IIT Bombay and almost all of them have changed their lifestyle to improve their metabolic health. We ensured that all these students went through a lab test to know their baseline markers and we found that almost all of them were Insulin Resistance besides being Vitamin D And B12 Deficient.

It would be a good idea to get our own labs done before we dive into learning to understand where we stand. Bare Minimum Would Be Fasting Insulin, Fasting Sugar, Hba1c, Lipid Profile, Liver Enzymes, Uric Acid & Vitamin D And B12 Level.

We doctors are poor patients and it is imperative that we understand what it takes to be metabolically healthy and have disease free ageing before we advise our patients. See you soon!

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Dr. Sonia Bhatt

MD (Paeds),
PGCAP(Adolescent
Paediatrics)
DAA (Dip Allergy &
Asthma)
Professor & HOD
Paediatrics
F H Medical College,
Agra

Holistic Health - Thriving for Wellness

Health should be defined positively in terms of well-being, rather than negatively in terms of the absence of disease, the disruption of function, or departure from some norm. Health is defined in terms of the goal of integrating physical, mental, social, and spiritual well-being.

“Wellness is a concept which has evolved from the concept of holistic health.”

It has been defined as a active process through which people become aware of and make choices toward, a more successful existence. Wellness involves positive thought processes, social and environmental receptiveness as well as lifestyle behaviors.

This is evident in a frequently cited definition of health from the 1946 Constitution of the World Health Organization which declares that ‘health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Hence, wellness is not static but a dynamic process aimed at promoting overall well-being.

The five Components of Holistic Health & Wellness

1. Physical Health:

Our physical health is what most people think about when they think of health. Sleep, nutrition, exercise, hormones and physical education are all fundamental to our wellness. In addition, external and environmental factors can impact our overall health.

2. Emotional Health:

Emotional health refers to our daily moods and emotions. Emotional health is a huge part of individuals state of health and wellness, bringing complete state of wellness to individuals ,decisions, relationships, and lives.

3. Mental Health:

Mental health focuses on our cognitive abilities that affect how our brain functions and has a big influence on the other aspects of wellness. There are genetic and environmental components of mental health to look at.

4. Social Health:

Social health is an important aspect for an individual’s health.

Research has shown that the happiest people on earth have deep connections with their friends, family, and community.

5. Spiritual Health:

A person’s spiritual health focuses on how they are connecting with their inner soul and the greater world

around them. Spiritual health often utilizes a person's faith and religion, but also incorporates nature, meditation and service. Experiencing peace within oneself can be crucial to overall wellness .

Holistic health for children and adolescents-

In today's world of excellence, almost everyone experiences various degrees of stress in their daily lives. Even children are not an exception to it as they are experiencing greater stress on account of rising expectations at both school and home to perform beyond their natural ability. India accounts for 21% of adolescent population worldwide. Stress resulting from academic schedules though prevalent in adolescents worldwide seems to be more severe among their Asian counterparts and in our country.

Children and adolescent are pressured with high academic burden, suffer greater academic stress, have low satisfaction relating to their academic performance, and high expectations. School related factors that result in depression among adolescents are poor academic performance, stressful events at school, and negative feedback from teachers and parents.

As adolescent girls of today are mothers of tomorrow, their health is the foundation for future generations. Poor psychological health can have several effects on adolescent girls such as poor eating habits, physical health, and coping skills. It also leads to school dropout, drug dependence, unprotected sex, and adolescent pregnancy.

Adolescent wellness is an increasingly important area of concern for parents and health care providers. It is of great importance to know how the adolescent group understand and interpret wellness because their understanding of the concept during this period of their lives may affect their lifestyle choices which may later be carried on into adulthood.

Importantly, a nuanced understanding of this term among adolescents is needed to apprise adolescent research, policy, and programmatic interventions that can improve the strategies and resources which adolescents make use of.

Holistic care in state of illness-

Holistic care provides an in-depth understanding of patients and their various needs for care and has important consequences in health-care systems .

During an illness, complex psychological, social and cultural needs disturb a patient's balance, and adversely affect his/her ability to carry out everyday activities. Holistic care, by addressing patients' physical, emotional, social and spiritual needs, restores their balances and enables them to deal with their illnesses, consequently improving their lives.

For ages, medical profession has largely been relying on objective management of disease, which only includes care of the disease only. In recent times, it has been evident that treating just the disease does not cure the patient in a whole.

Treating the disease provides relief just to the physical illness and leaves behind the more complex psychological, social, and spiritual concerns. Quality of life of a patient depends on relief from physical symptoms as well as on his sound psychosocial and spiritual well-being. Therefore, a holistic treatment approach is the need of the hour for the complete care of patient.

The CARE approach is an effort in guiding health-care workers for the complete care of the person.

Table 1 | CARE: A holistic approach

Abbreviation	Description	Approach
C	Control of symptoms	Evidence-based control of physical symptoms
		Control of psychological symptoms Complex decision-making
A	Anticipatory measures	Prognostication
		Advanced directives
		Anticipatory prescription
R	Reassurance	Proper communication
		Prognostication
E	Emotional and spiritual support	For patient, caregiver, and health-care workers
		Bereavement support

ROLE OF HEALTH CARE PROVIDER-

As pediatricians we believe a holistic approach to problems in childhood and adolescence will benefit the child, adolescent, and the whole family.. Consciousness-based medicine also seems to be efficient with children and adolescents, who are much more sensitive to the psychosocial dimensions than adults. Five needs seem to be essential for the thriving and health of the child: attention, respect, love, acceptance (touch), and acknowledgment.

The physician should be able to see if the child lacks fulfillment in one or more of these needs, and he can then demonstrate to the parents how these needs should be handled. This should be followed by simple instructions for the parents in the spirit of coaching. This approach is especially relevant when the child is chronically ill.

Health care providers should not expand their role by exercising more authority rather the should expand their role as teachers to assist people in developing and assuming a sense of responsibility for their own health or well-being.

While evaluating health status of adolescent and young adults a physician must instructs or reminds them of the dangers of drug and alcohol abuse, smoking, obesity, poor diet, overwork and we should also make them aware that ultimate responsibility falls to them to do something about these habits, attitudes, and practices.

Holistic mental health promotion programs conducted by involving family members, school faculties, and community members result in not only an improvement in their mental health but also the social, academic, work performance, and general health components.

These programs provide the adolescents with important life skills, help in achieving their full potential, and overcome difficulties. It is known that earlier the adolescents learn to deal with their stress, the better will be their psychological and physical health as an adult.

Let all of us remember and disseminate this important message as said by Greg Anderson:

“Wellness is the complete integration of body, mind and spirit-the realization that everything we do, think, feel and believe has an effect on our state of wellbeing”

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Dr. Rakhee Thakar

MD Pediatrics
punarnava@shanti-mandir.com
punarnava.online
+91 97378 69355

Holistic Medicine: From a Pinhole to Panoramic View

Whether due to the rising popularity of yoga in the last few decades or due to that of alternate medicine since the COVID-19 pandemic, there has been a global interest in holistic treatment in recent times. As a coordinator of treatments at Punarnava, an integrated centre for well-being, I am a staunch proponent of Holistic Health. However, like most modern doctors, my vision was also limited for a long time by my study of modern medicine until my discovery and study of alternate medicine, especially Ayurveda. The journey has been an interesting and also a fulfilling one for me. I did my MD in Pediatrics from Maulana Azad Medical College, New Delhi, and

worked as a consultant pediatrician in Delhi after that. In 2003, I joined Shanti Arogya Mandir, a charitable mobile health service, to serve Gujarat's rural community. Thence, as a general practitioner, I saw more adults with chronic health conditions like diabetes, high blood pressure, coronary artery disease and arthritis.

While my practice of modern medicine provided them symptomatic relief, it didn't reverse the pathology and often people who began with one disease, such as diabetes, gradually went on to develop other conditions, such as high blood pressure, acidity, arthritis and so on. The prescription just became longer and longer. Worse yet, the medicines also had many undesirable side effects.

The last straw that made me even more cognizant of the need for a more holistic approach to health was my battle with illness. When I started developing digestive issues with joint pains, skin allergies and a cough that seemed to be getting chronic, I was concerned that I was headed in the footsteps of my father who had suffered the last two decades of his life with autoimmune interstitial lung fibrosis and rheumatoid arthritis.

I had seen him suffer due to the illness and also due to the immunosuppressant medication that he was prescribed for the condition. Furthermore, I realized that despite my medical degree, I did not have the necessary skills to reverse my condition, let alone that of others. This led to my quest for Holistic Medicine, with a focus on Ayurveda and Yoga.

It gave me a chance to not only overcome my genetic predisposition and circumvent disease without side effects but also help others with the same of the traditional and alternate medicine systems covered under the Ministry of AYUSH, Ayurveda is an ancient science of Holistic Health that literally means "the study of longevity." Considered a sister science of Yoga, Ayurveda aims at preserving the health of the healthy and correcting the imbalance of the diseased.

It is based on the fundamental principle that any disease is due to an imbalance in three doshas that make up the body, namely, Vata, Pitta And Kapha, which are a combination of the five elements: Earth, Water, Fire, Air & Space. Undigested food, due to an impairment of jatharagni (digestive fire) and/or dhatvagni (tissue metabolism), leads to the formation and accumulation of aam (toxins) in not just the gut but all over the body. This manifests differently in different people – ranging from backache to cancer – based on several factors, including individual differences.

The factors that determine the extent of the inner balance are : Diet (Ahara), Lifestyle (Vihara) & Mental Outlook (Vichara), which shows the holistic nature of treatment. Moreover, appreciating the constitutional differences between individuals, it also offers a customized approach to treatment.

Most of the diseases that we see these days are labelled as psychosomatic; that is, the origin of the disease is in the 'psyche' or the 'mind' and its effect is on the 'soma' or the 'physical body.' How many doctors can deal with their own stress, let alone equip their patients to avoid emotional disturbance in an adverse situation? In Holistic medicine, Body & Mind are not treated as separate entities and the regulation of the patient's diet, sleep, exercise and mindset play just as important a role as the herbs or medicine prescribed.

To dissolve the emotional disturbances that eventually create disease in the body, we offer re-educative psychotherapy sessions at Punarnava. The model used in these sessions is based on ancient Indian philosophies but presented in a rational and practical way that appeals to the modern mind. We also offer yoga and meditation sessions, with postures and techniques drawn from the ancient texts of Yoga, Vedanta and Tantra, to untie the emotional blocks that originate in the mind but impact the body. Thus, a holistic approach to treatment targets the root of the disease by harnessing the innate strength of the body to restore its balance.

Punarnava, an integrated center for well-being, offers holistic treatment with a combination of Ayurveda (including panchakarma), Yoga, Meditation & Psychotherapy. Panchakarma (five procedures: Vaman, Virechana, Basti, Nasya & Raktamokshana) is a unique detox and rejuvenation treatment to purge the body of the toxins and imbalance that lead to disease. An integrated approach by a team of experts in Ayurveda, Allopathy, Psychology, Psychiatry, Yoga and Vedanta also equips health seekers with wisdom to modify their lifestyle when they return home.

The peaceful natural environment enlivened by Vedic chanting augments the healing process. It is very gratifying to see remarkable results in the patients who come for holistic treatment after having been on conventional therapy for years. For instance, one French patient with a long history of weak muscles in the hands due to Guillain-Barré syndrome danced with joy when he was able to hold a grain of puffed rice with a pincer grasp, which had not been possible for him to do for years. Often diabetics overcome their insulin resistance through the detox procedure. We have also seen a marked reduction in the requirement for medication after holistic treatment.

Because of the psychotherapy sessions, many patients have been able to resolve their interpersonal relationships, which has had a significant positive impact on their physical health as well. Witnessing such transformations on a regular basis has shown me the significance and power of holistic treatment. William Osler, the father of modern medicine, said that the foremost duty of a physician is to teach the masses how to live without medicine. The study and practice of holistic medicine have given me the skills to make this offering to society in the spirit of the prayer from the Vedas: "sarve santu nirāmayah," "May all beings be free of disease (literally, free of aam)."



Dr. Isha Singh

MBBS, DCH, CCAM
Consultant
Adolescent Health
Specialist And
Pediatrician

Digital Wellness For Family

What is wellness? Wellness is the act of practicing healthy habits on a daily basis to attain better physical and mental health outcomes. So, similarly the digital wellness implies healthy relationship with technology on daily basis to attain better physical and mental health outcomes.

It is a well-known fact that we can't survive without technology in today's world. From workplaces to schools to houses everywhere it has invaded our lives. For a healthy life, balance is needed in everything - work life balance, balance diet, balance in physical activity. Similarly, the balance is also needed in the use of technology.

Overuse or misuse of technology is not good for health of anyone in family so there should be some rules set for using technology which should be followed by everyone in the family. The most important point here being the rules followed by all family members. The children are going to follow in their parents' footsteps in most aspects of life – be it how parents talk, how they eat, how they treat people around them, how they dress up.

There should be some places in the home which should be no screen zone like dining room or bedroom. You can also set a time in the day when no one in family is using a phone or tablet or computer.

In today's world where everyone carries at least one mobile phone, you can't keep the children of any age away from screens but the parents can control how their children spend time in front of screen. From an early age, tell children about problems of social media, but for that, parents should be aware of frauds and blackmailing that anyone can face if they are being irresponsible while using social media.

Use of screens should be limited to minimum for very young kids. Ideally, no kids should be exposed to screen before 2 years and even after that it should be less than 60 min in 24 hours. Only the duration is not important, the content is even more important. Unsupervised screen viewing should be totally condemned. If toddlers or preschoolers are watching the screen, then try to convert it into a learning process.

For example, show a short poem or story concerning any animal to the child then show the pictures of the same animal, act like the same animal and discuss about the same for few days. So, now your child knows everything about this animal - its babies, its home, its sound anything.

Similarly, explore various topics for all age groups. My 5 year old knows the planets name as loves to see videos about space, the life cycle of a butterfly which I showed him in book and on video; he also knows a bit about volcano and lava, all just out of curiosity.

The children going to primary and middle school often face bullying. Now, this same bullying is faced by people across all ages on social media platforms. So it is important that parents talk to children about it. Their children could be the one bullied or he/she could be the one who is bullying others.

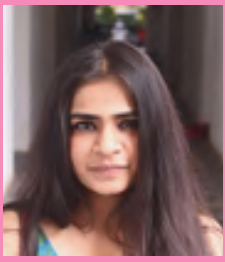
When teens start exploring social media make them aware of fake profiles, blackmailing, rules of sharing personal details and photos. Parents should request their children to keep them in friend list in any social media account so they can keep a watch on who their friends are and what they are posting online. Make teens aware that anything once posted will always remain in the history somewhere in the cloud even if they have deleted it from their end.

Parents should know who their children's friends are - both offline and online. They should know what websites their children are spending time on. To achieve this, parents need to really talk to their children and listen to them, give them their full attention when they are talking regarding anything and only then parents can expect that children will listen to them. So in a nut shell, we, the parents of today's generation, should understand the importance of digital wellness for us as a family. We should follow healthy digital lifestyle so that the same might be followed by our children. Have a happy healthy and digitally sound life!!!

Dr. Susan Swayar A Brief Biosketch :

Professor Susan Sawyer AM MBBS MD FRACP holds the Geoff and Helen Handbury Chair of Adolescent Health at the University of Melbourne and is Director of the Centre for Adolescent Health at the Royal Children's Hospital and Murdoch Children's Research Institute where she leads an Australian NHMRC-funded Centre for Research Excellence on Driving Global Investment in Adolescent Health. She has published over 400 peer review publications and 50 book chapters (H-Index 89), including leading two Lancet series on adolescent health and the 2016 Lancet Commission on Adolescent Health and Wellbeing. In 2015, she led the development of a free Massive Open Online Course (MOOC) on Global Adolescent Health to enhance global access to basic education about adolescent health and development that has attracted over 10,000 students. She also leads a postgraduate program in adolescent health through the University of Melbourne. She has a particular interest at the interface of health and education and worked with WHO and UNESCO to develop the first global standards for health-promoting schools. In Australia, Susan was a member of the Royal Australasian College of Physicians divisional committee for Paediatrics and Child Health (2002-08), and as the inaugural chair of the RACP Adolescent Health Committee (2003-2008), established the framework that led to accredited specialist training for Adolescent and Young Adult Medicine in 2017. Internationally, Susan has had multiple roles with professional associations. She is a past board member of the US Society for Adolescent Health and Medicine (2014-2016) and was president of the International Chapter of SAHM in 2002. She is the immediate past president of the International Association for Adolescent Health (2022-24), having been president from 2017-22 and vice-president (Oceania) from 2009-2018. She co-leads the Adolescent Medicine Specialist Advisory Group for the International Paediatric Association. Susan is the director of a WHO collaborating Centre for Adolescent Health and was the inaugural chair of the Australian Network of World Health Organization Collaborating Centres (2020-23). Within WHO, she chaired the Technical Steering Committee on Maternal, Newborn, Child & Adolescent Health (2011-16) and is a member of the SEARO Technical Advisory Group on Maternal, Child and Adolescent Health (2017-). She is a member of various editorial advisory committees including Lancet Child and Adolescent Health, Lancet Western Pacific, Journal of Adolescent Health, and the Medical Journal of Australia.

TRAILBLAZER

**Dr Prachee Bajania**

Designation: Filmmaker
B801, Gala Gardenia,
Near Safal Parisar,
South Bopal, Ahmedabad
prachbajmail@gmail.com
9427046669

Like a drop towards the ocean :

At the risk of sounding impertinent, especially while writing for this magazine, I'd like to admit at the outset that I did not want to be a doctor despite belonging to a family of doctors from diverse specializations. I was always good at academics in school which may have led to the general presumption that I was to study medicine.

However, I had no such expectations of myself. In fact, I was only clear about what I did not want to do. A long time has passed since and I don't remember why exactly I was so reluctant. I guess I can explain the genesis of my risk-taking temperament by this first independent decision to select what an obscure career path was then.

I got admitted to the B.Sc. program at St. Xavier's College, Ahmedabad and picked Botany in second year. Frankly, I was quite unsure of what one could do with a degree in Botany, but I enjoyed it immensely. I went to high school at Scindia Kanya Vidyalaya, Gwalior and didn't know anyone in college. Most of my batchmates (later friends) thought I was snooty which meant that I had a lot of free time on the weekends. So, I joined a course in gardening and landscaping in the first year and journalism in the second and third years.

Journalism was my first exposure to the media, and I was thrilled at the prospect of interacting with people from worlds that were very different from my own. As an intern at the Times of India, Ahmedabad, I did several stories on wildlife, environment, pets, health, cinema, women's collectives and even covered the notorious hooch tragedy of 2009.

My experience as a trainee reporter at TOI combined with a brief stint at a radio station gave me a deeper understanding of public communication. I surprised myself yet again when I appeared for the rather competitive entrance exam for post-graduation in film and video communication at the National Institute of Design, Ahmedabad.

I had no experience in film but a friend of mine suggested I take the test because he liked the way I narrated an incident to him. "You know how to tell a story; I think you should learn to make films." It was that simple, or not. I cleared the final interview and joined an institute that would change the way I looked at art and cinema.

Art makes you see things you hadn't noticed before. I started understanding the nuances of colour, composition, visual language and caste. Hitherto completely unaware of Dr. Babasaheb Ambedkar's life and work, his words jolted me out of a deep sleep. But the most important lesson from art school was/is the desire to find my own voice.

Maybe that's why I decided to go for a second master's in film direction and screenplay writing at the Film and Television Institute of India, Pune.

Many people ask me why I felt the need to do a second master's in film. I had a job and was doing quite well so why go back to school? I think my engagement was different, I wasn't new to the medium and my work experience was richer. I was older and dealt with my coursework at the film institute with deeper rigor and imagination. But the quest to find a unique, courageous voice was still at the heart of my practice.

It has been an exciting, sometimes unpredictable journey but I'd do it all over again. I had varied interests as a child and my parents encouraged me to explore everything without letting me worry about the future or the financial gains these interests would bring. My childhood in the small town of Dhrangadhra, Gujarat was quiet, unhurried and extremely crucial in shaping my life and work as an artist.

There was no pressure to perform or be the best at anything. Our weekends were mostly spent on farms playing with animals and we felt the gradual passing of seasons. My graduation in Botany strengthened my association with plants and animals, a recurring theme in all my films. Close contact with nature may have been an outcome of the way we spent our childhood but in retrospect, it feels like a carefully curated part of a larger design!

In over a decade, I have made close to 15 films, most of which have shown at reputed festivals in India and abroad. I have learnt that a filmmaker must keep practicing and making new work, no matter how big or small its scale. That's the only way to learn and inch closer towards finding a language for our expression.

I once attended a doll making workshop with filmmaker Hansa Thapliyal during the coronavirus lockdown. Working with waste material helped me deal with the despair that accompanied the pandemic. It broke all stereotypes of what a doll must look like which forced me to think about the trajectory of our expectations. I keep going back to this very contemplative and healing process of working with material.

Making films has been rocky as much as it has been rewarding. It is an expensive affair and sometimes big budgets do ensure good technicians and resources, leading to productive collaborations.

The money to work on independent films is not easily available in India, especially as state-run support for filmmakers has been systemically diminished in the last two decades. I wish this gets better over time and we can direct all our energy to our creative process rather than securing funds.

I feel really privileged to have come this far and hope to diversify my practice in the future. Films have allowed me to bring together all my 'useless' pursuits and I still feel goosebumps when I start new work.

More than the appreciation or accolades that may or may not follow, there is a heady ecstasy in knowing that throughout my life, I have done exactly what I wanted to do.

PEARLS OF WISDOM



Dr Mridula Phadke

Ex - Vice Chancellor,
MUHS, DMER,
Ex - Prof of Ped,
BJMC, Pune

Work Is Worship

Brief Biosketch : Dr. M. A. Phadke is Ex-Vice Chancellor, MUHS, DMER, Prof of Ped, BJMC Pune. She is also Sr. Advisor to Govt, UNICEF Mumbai. She is a powerhouse of knowledge, intelligence and wisdom. I have known her for 3 decades and am blessed to have done my postgraduation under her eagle eyes. She is a teacher par excellence, an astute clinician and an erudite researcher. She continues to be a leader and brilliant star in the field of pediatrics, genetics, nutrition, advocacy and medical education.

Sharing her insights in her own words:**Work life balance-**

Balancing your professional work with personal life and family responsibilities can be challenging. I lived in an era when few women used to work to support the family income or some worked because they had become doctors, teachers or engineers and wished to pursue their profession. To my mind, every woman should do some work to become self-reliant and boost her self-esteem.

When I joined as a medical teacher in a Govt medical college, I would attend the duty, come home and do household chores including looking after children. I thought it was my first priority. There were few avenues for entertainment. So, the entertainment for us was hospital work, teaching and then look after the house. There was no segregation between office work or house work. Entertainment like friends, lunch or dinner parties, dances, music was not at a scale as is today. However, I enjoyed working in the hospital and looking after children immensely.

Therefore, I never thought of work life balance. It was not the 'in thing'. In today's world, you live in a different generation which is better evolved, better aware and want to do everything. In this scenario, please set up your priorities which may vary from person to person and vary from time to time in the same person. But make the environment around you in the office, enjoyable. **So, learn to like your work whether at office or at home.**

Achieving goal-

Ratan Tata has said, "If you want to walk fast walk alone. But if you want to walk far, walk together.

This is very true when you assume higher and leadership positions. It is very easy to find fault in your assistants. But if you appreciate their work, they will walk the path of success with you. This is the quality of **appreciative enquiry** which must be inculcated.

Work hard-Hard work has no substitute and there are no short cuts in any faculty, certainly not in medicine. You do not work for your boss but you work for yourself. A smile on the face of a recovering child is worth all the hard work that you have put in. Of course, reward for good deed does not come today but at different times and in different forms. Work without thinking of reward. Success is 99% perspiration and 1% inspiration.

World is very competitive. Your best competitor is yourself. Try to do better than what you did yesterday.

Cross the hurdles as they come, one step at a time-

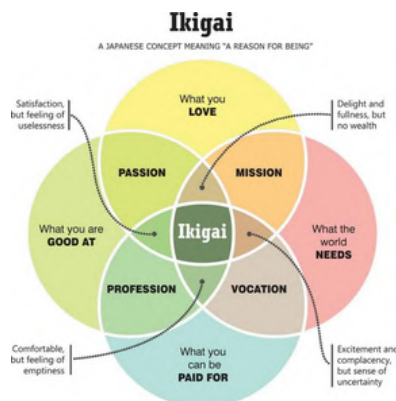
When at work, we may face gender bias, promotion pressures, high expectations at work place, at home or sometimes from close relatives. At such times it is important to communicate not only with your superiors or 'bosses' but also with your subordinates. They can offer solutions that may not have occurred to you. Long working hours, high stress environment can drain you many times. Keeping in good physical and mental health is vital. Try to develop some support systems. A good hobby can be a stress buster.

Ikigai principle - This Japanese principle (Iki meaning life and gai meaning purpose)

Tells us how we should look at life. This philosophy teaches what we should aim at-

1. What do I like most? -my passion
2. What does the world expect or need from me? -my mission
3. What am I good at? - my vocation
4. What am I getting paid for? -my profession

Convergence of all 4 elements is the key to success and happiness.



Finally, happiness comes by giving happiness, do your work well today and life falls in place.

Good luck to my students, colleagues and peers. Let us strive hard to achieve our goal to give the best life to the children of the world.

Acknowledgement -

I want to thank my best student, Dr. Preeti Galagali who requested me to share my life experiences for the benefit of junior pediatrician colleagues who are entering this worthy profession. I wonder if I am qualified to do so as ***"I have not done any work; have to do much!"***

WOMEN OF SUBSTANCE



Dr Susan Sawyer

AM MBBS MD FRACP

Director, Centre for
Adolescent health,
Royal Children's
Hospital

Inspiring Life Stories

As a medical student and then junior doctor, I still remember my anxiety at not knowing what sort of medical career lay ahead of me. My male medical mates had their future paths all mapped out as surgeons, anaesthetists and radiologists, but I swayed in the wind, enjoying all my rotations. I ended up training in paediatrics at the Royal Children's Hospital in Melbourne, Australia, and then subspecialized in Respiratory Paediatrics. A major reason was my interest in global child health, knowing how much child mortality was caused by respiratory infections.

Early in my respiratory training, that path was seemingly hijacked by a group of girls with cystic fibrosis (CF) who, perhaps as one of the first female Australian trainees at the Children's, assailed me after an early wardround with multiple questions about their sexual and reproductive health. I didn't know the answers and the textbooks I dutifully consulted also failed to provide insight. Little did I know that their exhortations of "But that's not good enough, study us!" would quietly shape a very different career from what I'd initially imagined in global child health.

My doctoral research degree focused on evaluating the 'new' morbidities affecting adolescents with CF now that they were mostly surviving through adolescence - which of course included sexual and reproductive health. I remember my excitement at publishing that first paper on sexual and reproductive health in young women with CF in the British Medical Journal - 400 or so papers later, I still get a buzz when I see fresh proofs!

Mentorship matters but careers will happen regardless

My interest in adolescents with cystic fibrosis coincided with the establishment of Australia's first academic centre of excellence in adolescent health at the Royal Children's Hospital in 1991. In addition to research supervision by the Professor of Respiratory Paediatrics, I gained a second supervisor in Professor Glenn Bowes, the inaugural director of the Centre for Adolescent Health, whose training in politics and the media was as valuable as his academic expertise.

After my doctoral research I did what most aspiring paediatricians did back then, which was to spend a few years overseas. While historically trainees went to the UK, I went to the US, spending 2 years at the Harvard School of Public Health in the Department of Respiratory Physiology. While there, I took the opportunity to engage with the Department of Pediatric Pulmonology at Children's Hospital Boston where, in addition to experiencing a wonderful array of 'zebras' (aka rare respiratory conditions), I quietly appreciated how well I'd been taught in Melbourne. Having no training in adolescent medicine though, I also greatly benefitted from joining the monthly education afternoons run by the Department of Adolescent Medicine at Boston Children's, the oldest Adolescent department in the US.



Ritu Vyas

Manager operations
Organisation- SNS
foundation
Address- 87- C,
Kalani Bagh
Dewas, MP 455001
9826043527

From Vulnerability to Vitality: The Power of Support for Societal Growth

I am Ritu Vyas, a dedicated social worker in Dewas district. My journey in social work began with a degree from the Indore School of Social Work, and since 2003, I have been tirelessly serving the community. Over two decades, my leadership and vision have enabled the SNS Foundation in Dewas to grow and thrive.

About SNS foundation : Established in 1976, SNS Foundation is named after Sant Nischal Singhji (1882-1978), a spiritual leader and a social reformer committed to education. The Foundation is the corporate social responsibility arm of the Anand Group.

The Foundation addresses four development areas – education, health and hygiene, skill development and community conservation. The Foundation's mission is to create social impact among rural communities by changing the behaviour of community members with the aim of achieving economic self-sufficiency and co-existing harmoniously with the environment.

SNS Foundation is present at 360 project sites across 8 Indian states (Himachal Pradesh, Uttarakhand, Haryana, Rajasthan, Madhya Pradesh, Maharashtra, Karnataka, Tamil Nadu), expanding its presence in and around Anand manufacturing centres.

My commitment to education led me to adopt eight government schools through the SNS Foundation. These schools were transformed to rival private institutions with new classrooms, drinking water systems, toilets, and solar panels. However, I believe true impact comes from nurturing young minds. Thus, I initiated remedial classes for students needing extra support and advocated for adult education to engage parents in their children's academic journeys.

Despite initial challenges, these efforts have benefited over 6,000 students. In addition to education, I am passionate about empowering youth through our Skill Development Center. We offer Para-Nursing and Office Assistant courses, providing employment opportunities for youth from

low-income groups. To date, our center has trained over 1,000 individuals, with 78% successfully placed in hospitals, offices, and homes across the Malwa region.

Empowering women has been another cornerstone of our work. Together with my team, we've established over 325 Self Help Groups, empowering more than 3,500 women through training and support. The formation of the Tejaswini Mahila Multipurpose Cooperative Society has enabled these women to set up a shop in town, with our efforts extending to digital platforms like Amazon Saheli and India Mart.

Recently, we established a factory equipped with High-Speed Sewing Machines and a Tiffin Center, providing employment to an additional 300 women and achieving a turnover of Rs 20 lakh for the cooperative society.

My contributions to social welfare were recognized by the Women and Child Development Department, Government of Madhya Pradesh, leading to my appointment as the Chairperson of the Child Welfare Committee (CWC).

In this role, I've tackled numerous challenging cases with innovative solutions, driven by my unwavering dedication to innovation and sustainability in the social sector.

As both a mother and a professional, I've not only advanced in my career but have also significantly contributed to societal development. My story reflects relentless dedication, leadership, and a pursuit of excellence in making a positive difference in the lives of others.

Few of key partners of SNSF are:

Anand Group Companies: Anand Automotive, Enchemco Anand, EnciscoAnand, Anand I-Power, Anand CY Myutek Automotive, CY Myutek Anand, Faurecia Clean Mobility, Gabriel India, Haldex India, Henkel Anand India, Mahle Anand Filter Systems, Mahle Anand Thermal Systems, Mando Automotive India, Spicer India, Sujan

Global Alliance, GE Capital, Honda Motorcycle & Scooter India Ltd., Kohler India Philips India Ltd., Punj Lloyd, Schneider Electric India Foundation

Government and Other Organisations: American India Foundation, Asian Development Bank, People's Action and Rural Technology Council (CAPART), Haryana Priority Projects Council, Ministry of Health and Family Welfare (Government of India), National Bank for Agriculture and Rural Development (NABARD), United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA)





HE FOR SHE



Dr. Pukhraj Bafna
(Padmashri)

MD, DCH, FIAP,
FICP, PhD, MA (Jain Darshan)

Rise up and embrace your power

Dr Pukhraj Bafna is a man of remarkable wisdom and is well-known for his social work with the tribal communities of Chhattisgarh. He is recipient of several awards out of which the most prestigious is Padmashri award which he received in 2011. The National IMA C.T. Thakkar Award in 1979, the Dr. B.C. Roy National Award by the Medical Council of India in 2017, the Times of India Lifetime Achievement Award in 2017, the GAPIO International Lifetime Achievement Award in 2018, the Udayachal Lifetime Achievement Award in 2024 are amongst the few.

He has authored chapters in several prominent medical texts, including the IAP Textbook of Pediatrics, IAP Textbook on Adolescent Health, Bhave's Textbook on

Adolescence, Textbook of Medico-Legal Sciences, and a book on international training for adolescents

It is worth noting that his book on the "Status Of Tribal Child Health" is the only one of its kind.

Additionally, he has conducted Ph.D. research on Yoga And Adolescent Asthma.

He has chaired the ethics committees for the Government Medical College in Rajnandgaon, Chhattisgarh Dental College in Rajnandgaon, Government Digvijay P.G. College in Rajnandgaon, and Shahid Hospital & Research Centre in Dalli Rajhara.

He has been writing a weekly health column consistently for the past 53 years without interruption. Amongst colleagues Dr Bafna is well known for his spontaneous writings in the form of "shayari."

सुनो द्रौपदी, शस्त्र उठा लो, अब गोविन्द नहीं आयेंगे
गूँजती चीत्कार, इंसानियत शर्मसार और न्याय की गुहार !! कब तक ?

डॉ. पुखराज बाफना (पदमश्री)
राजनांदगाँव

मुझे याद है कोविड के दिनों का वो मंजर, जब डॉक्टर को भगवान कहा गया, आरती उतारी गयी, थालियाँ बजायी गयीं, स्वागत के गीत गाए गए, फूल बरसाए गए और आज कोलकाता के आर.जी. कर मेडिकल कॉलेज में हमारी डॉक्टर बितिया के साथ वहशी दरिंदों ने बलात्कार करके, उस मासूम की हत्या करके पूरी मानवता को शर्मसार कर दिया. उसके शरीर पर सैंकड़ों निर्मम खरोंचें, आँखों में घुसे कांच के टुकड़े, टूटी हड्डियाँ, फैली हुई टांगें और नग्न मृत शरीर चीख चीख प्रमाण दे रहे थे कि उसकी हत्या की गयी है लेकिन वाह रे प्रशासन ! माँ बाप को अपनी बच्ची से तीन घंटे तक मिलने न दिया लेकिन सबूत मिटाने के चक्कर ने सारा सच उजागर कर दिया. सारा देश आक्रोशित है, महिलाएं भयभीत हैं, चिकित्सक समुदाय निःसहाय है. न्याय की गुहार किससे लगाएं ?

लूटकर मासूम की आबरू जालिमों तुम्हें नींद कैसे आई होगी ?
तुमने तड़पाकर उस खिलते फूल को, अपनी बेटियों से नज़र कैसे मिलाई होगी ?
कुसूर क्या था शायद कोई खता नहीं थी, कलेजा नहीं फटा जब वो चिल्लाई होगी ?
तुम इतने बेरहम कैसे बन गए ऐ दरिंदों ! सोचता हूँ शायद तालीम ऐसी पाई होगी

बेटियाँ पूछ रही हैं –

- क्या हमें डॉक्टर बनने का अधिकार नहीं है ?
- डॉक्टर का दूसरा घर अस्पताल होता है, क्या हम वहाँ सुरक्षित है ?
- लोगों की जान बचाने के लिए हम अपना समय, हमारी नींदें, अपनी उम्र देती हैं हम लोग. अब हमें कौन बचायेगा ?
- ड्यूटी करने वाला डॉक्टर पहले से ही तनावयुक्त होता है, उसके पास सोने और खाने का समय भी नहीं होता, लोगों की जान बचाने के लिए अपनी जान गवां देता है कई बार. वह कितना सुरक्षित है इस पर कभी सोचा है आपने ?
- हम भी इंसान हैं, हमारा भी वजूद है, हमारा भी आत्मसम्मान है, हमारी भी अस्मिता है. उस पर कुठाराघात करते हुए लोगों को शर्म क्यों नहीं आती ? क्या उनके घरों की बहू बेटियां यह सब सह लेती हैं ? तो फिर ज़माना चुप क्यों है ?
- डॉक्टर को जिंदगी और मौत के बीच कई निर्णय शांत मन से लेने होते हैं. भयाकांत डॉक्टर मरीज की जिंदगी के लिए सही निर्णय कैसे ले पायेगा ?
- हम भी सांसे लेते हैं, हमारे घरों में भी हमारे माँ बाप हैं. क्या हम घर से बाहर निकलना बंद कर दें ? डॉक्टर बेटी को बाहर पढ़ने या ड्यूटी में भेजूं या ना भेजूं के उहापोह में माता पिता की चिंता अब कौन करेगा ?
- हम चिकित्सक किसी पार्टी, किसी अमीर, किसी गरीब, किसी रंग, कोई जात का भेद किये बिना समर्पित भाव से हर इंसान का इलाज़ करते हैं, फिर ऐसी दरिंदगी हमारे साथ क्यों ?
- किसी माँ की कोख से पैदा होने वाला आदमी उसी कोख पर कैसे कुकृत्य कर सकता है ?
- हमारे सफ़ेद कोट लाल हो रहे हैं और काले कोट की मदद मांगने को मजबूर हम क्यों हैं ?
- कोरोना काल में हम चिकित्सकों ने नख से शिख तक लिपटे किट्स और डायपर्स में हप्तों बंद रहकर जन सेवा की और हममें से कईयों ने अपनी जान भी दी . लोग इतनी जल्दी भूल गए ?
- हमारी सुरक्षा पर कोई कानून क्यों नहीं ?
- दरिंदगी की हदें पार हो गयीं पर त्वरित न्याय दूर दूर तक दिखाई क्यों नहीं देता ?
- जब हमें इमरजेनसी की कॉल आती है तब हम अम्बुलेंस का भी इन्तेज़ार नहीं करते और दौड़े भागे मरीज की जान बचाने आधी रात को चले आते हैं. ऐसे में हमारी जान का खतरा लोगों को क्यों नहीं दिखता ?
- घटनाएँ घटती हैं, बलात्कार की वारदातें अखबारों में छपने के लिए क्यू में खड़ी हैं, तो तुरंत संज्ञान लेकर समस्या का हल क्यों नहीं खोजा जाता ?
- ऐसे में कौन लड़की डॉक्टर बनेगी ? कौन आपके घर में डिलीवरी कराएगा ? कौन नर्स आपकी परिचर्या करेगी ? कौन देश के स्वास्थ्य की रक्षा करेगा ? हम असुरक्षित रहेंगे तो आप कैसे सुरक्षित रहेंगे ?

ये सारे सवाल आजतक अनुत्तरित हैं पर अब और आज आपको जवाब देना होगा.

सुनलो सुनलो और सुनलो !

अपराधियों को बचाते कुत्सित, राजनैतिक धंधेबाजों, सडांध मारते पुराने सिस्टम में कुंडली मारकर बैठे लोगों, चीख चीख कर चिल्लाते प्रमाणों के बाद भी सबूत मांगते अंधे कानून के कानून विदों, “ हम क्या कर सकते है “ की मानसिकता लेकर जीने वाले सोते समाज के मठाधीशों ! सुनलो !! कल तुम्हारी बहन बेटियाँ भी इसी तरह वहशी दरिंदों का शिकार बनेगी तब तुम कहाँ गुहार लगाओगे ?

जरूरत इस बात की है कि ऐसी घटनाओं पर शासन, प्रशासन, सरकारें तुरंत संज्ञान लें, दूसरी घटना का इंतज़ार न करना पड़े, जीरो टोलरेंस का कानून बनें और प्रचारित हो, लड़कों को और पिताओं को घरों में, स्कूलों में महिलाओं कि इज्जत करने के संस्कार मिलें. इसके लिए इस देश में एक मजबूत “ पोलिटिकल विल और संसद में बिल “ की जरूरत है जो डॉक्टर को “पब्लिक सरवंट” का दर्जा दें वर्ना डॉक्टर मौमिता देबनाथ की तरह कितनी ही बेटियों की चीत्कार शून्य में मिल जायेगी. इसलिए जरूरत इस बात की है कि हमारी बहन बेटियाँ खुद सक्षम बनें.

मैं तो हर बहन बेटी और माँ से कहूँगा –

सुनो द्रौपदी शस्त्र उठा लो, अब गोविन्द नहीं आयेंगे
छोडो मेहंदी, खडग संभालो, खुद ही अपना चीर बचालो
द्यूत बिछाये बैठे शकुनी मस्तक सब बिक जायेंगे
सुनो द्रौपदी शस्त्र उठा लो, अब गोविन्द नहीं आयेंगे...

कब तक आस लगाओगी तुम, बिके हुए अखबारों से
कैसी रक्षा मांग रही हो दुःशासन दरबारों से
स्वयं जो लज्जाहीन पड़े है वो क्या लाज बचायेंगे
सुनो द्रौपदी शस्त्र उठा लो, अब गोविन्द नहीं आयेंगे...

कल तक केवल अंधा राजा, अब गूंगा बहरा भी है
होंठ सिल दिए हैं जनता के, कानों पर पहरा भी है
तुम ही कहो ये अश्रु तुम्हारे किसको क्या समझायेंगे
सुनो द्रौपदी शस्त्र उठा लो, अब गोविन्द नहीं आयेंगे...

बेटी पढ़े, बेटी बढें, बेटी लड़े और बेटी मरे – अब ये नहीं
चलेगा – कुछ करना ही होगा.

We strongly condemn the horrible act of rape and brutality that occurred with the post graduate student of R.G Medical College. We stand in unwavering support of the victim and demand rightful justice on her behalf. Justice, Safety, Security and Public Awakening to be reinforced periodically.

YOUNG PROFESSIONAL CONNECT



DR NIMRAT S SIDHU

Assistant professor
Adesh Medical College
Consultant paediatrics
Healing group of hospitals
Chandigarh

Small Acts, Big impacts: Transforming Live

It seems yesterday I entered medical college in Bangalore, where my journey as a pediatrician really began. It wasn't just a long journey in virtue of the distance from the North to the south, it was diversification of all kinds. I'm often asked, who's a good pediatrician. The answer is as simple as taking a candy from a child, once you know you want the candy and the child really likes you. Answering this as a mother is to know that the doctor is a good person. For eg, When I go to a particular doctor, I don't want to know what the other doctor did wrong, or how I faltered in this journey, I'd like to

know what I could do better, minus the judgement. I am going to strive to make the experience of visiting the doctor a best once you could've ever had. And that's something I learnt while doing my residency- things I should NEVER do. And things I MUST do at all times.

I remember two distinct things from my MD- the smell of cold coffee mixed with idli from our beloved Ganesh Darshan canteen which was my oxygen and my first night duty which essentially set the stage for the special area of interest in this field : A girl child.

On my first night duty in the emergency, I got a call at 2.30am about a 7-year-old, who was abused by her stepfather. She had lacerations around her genitalia. As much history I could gather in my humble Kannada fluency skills- her stepfather ran the show and she didn't want to press any charges, she refused admission and regretted mentioning the story, because she couldn't afford to be a single mother, particularly so of a girl child. Something in me changed forever.

Three years passed many such cases of abuse, neglected girl children, distressed parents of female babies were seen , each time engraving it in me, how we failed as a society and how far along we need to go also making me fathom the fact that my journey as a paediatrician might've just began but my journey of the world as a girl then a woman then as a working woman began the day I set my foot outside the door. Being an active part of the collaborative Child response Unit (CCRU) of my college, helped me to see these problems first hand.

It is said that once you pick up a pen, the ink stays with you forever. I penned various articles for national newspapers."The very first time I wrote an article for a national newspaper (Hindustan Times), it was titled 'Pigeon Pair or Two in One.' In this piece, I explored the story of a mother who, after nearly losing her life during childbirth, desperately wanted to know the gender of her newborn. As female staff members in the room that day, we couldn't fathom how the joy of bringing a new life into the world could turn into her worst nightmare.

How women can change the game? Our contribution also begins by supporting women at home, our mothers, sisters, daughters and of course our female task force. Support is not only extended by helping out during times of crisis, but also sometimes leading the way with empathy. They say charity begins at home, so as a woman and now as a mother- it is my duty to be able to provide the female working staff a safe haven, a

place where not only physical but mental conditions should be favourable.

All females at our place use sanitary pads, and all of them are vaccinated with cervical cancer. Whilst they work, they are encouraged to pursue any hobby they wished they had learnt, for e.g. a staff member wished to have learnt guitar we got him one and classes to polish his skills. Their kids are also partly our responsibility, their right to education is our responsibility, right to have clean nutritious foods and of course, when they fall sick, we are sure to catch them in the net of best health care. Luckily, I became a part of my school's organisation called CESA, where we continuously support young girls from humble backgrounds by supporting their education to health and giving them opportunities for interactive activities.

To conclude I would like to say that there are countless ways through which we can uplift girls and needy women around us. Even small contribution can create a ripple effect of change.

[GUEST COLUMN]

Dr Nimrat S Sidhu



Pigeon pair or 2 of a kind?

Change is the only constant. As I transition from the hustle-bustle of my residency in Bangalore to life as a consultant in a government hospital, I see change everywhere. A self-confessed Chandigarh aficionado, a particular pattern ticks me and compels me to write this piece.

Recently while on call, I was told that an emergency caesarean section had to be performed and the mother had been diagnosed with postpartum haemorrhage (complication of a placenta position). Being a paediatrician, I reach the scene, that is, the operation theatre, early to take history and ensure safe delivery of the newborn.

The mother was a 28-year-old Kharar resident with two healthy daughters and no other complications. Our team, comprising an anaesthetist, a gynecologist and nurses, stabilise the evidently nervous patient. As the baby let out its first cries (the best moment for any paediatrician), the mother even more panic-stricken, kept asking the gender. Her disappointment was palpable when she saw the baby. Even semi-conscious, she kept mumbling that the baby needed to be a boy.

Pressure for a male heir
Confused, I kept thinking of the incident

throughout my rounds. Later, I checked on the baby and ended up asking the inevitable: Why do you not want a girl child? I hear about the pressure she is under to provide her husband with a male heir.

Saddened, I finished and headed home thinking where are we wrong as a society? A lady who gave birth to a healthy female child, in an operation theatre full of female staff still feels vulnerable to these pressures?

Born in a home where my mother, an only child, had two daughters, and my elder sister also has two beautiful girls, I do not understand where this school of thought stems from. My mom, the driving force behind us, tells us that we are her entire world and that if there is a place for us with no entry or exit time, it is hers. Is a family not complete with two daughters? We are the sugar and the salt of our family. My sister is known for her sound advice and literary skills and I for a solid vote, sharing a laugh and lightening the mood. The four of us neatly fit into each other's lives.

Why not invest in a girl-child's love

Is this the norm in business families? It does not resonate, seeing as my nieces are the darlings of the family and my



As the baby let out its first cries, the panic-stricken mother kept asking the gender. Her disappointment was palpable as she kept mumbling the baby needed to be a boy.

PHOTO FOR REPRESENTATIONAL PURPOSES ONLY

mother-in-law longs for a daughter. I sit down as a doctor, daughter, granddaughter, wife and daughter-in-law to understand why investment in 'my clan' is

'zero investment'? Why right to breathe, celebrate and educate is a tribulation. Everything today is as an asset or liability but education, values and love to your girl is a long-term investment with 100% return.

Equal division of tasks between children, irrespective of gender, in the south is responsible for their high sex ratios. With Punjab's ratio being 995:1000 we are far behind states like Kerala.

Blame the government?

Negative stereotypes surrounding the girl child make people do cruel things but organisations such as Nanki Chhaan provide basic education, healthcare and livelihood opportunities. With schemes like Mai Bhago for education and Bebe Nanki Ladli to curb female foeticide. Where are we failing?

My father says, "No one can love you in this world as much as daughters." They are a ray of hope and sparkle of sunshine. From miles away, they can tell your mood is off by the way you sound. Carrying your legacy forward, your values to another household, they will make someone's house a home, while still making yours their home for life.

So why stop them? Let them live, give them wings, and allow them footprints in the map of the world. Educate them instead of investing in dowry. Yet to start a family, I do not know whether we will have a pigeon pair or two of a kind, but we will value and cherish the healthy baby not the gender.

subbstr@yahoo.com

(The writer is senior resident at civil hospital in Mohali)

Its the hay season, its the May season! Its asthma awareness month



Dr Nimrat S Sidhu

While obedient rapid strikes only in second week of February, Hay season strikes March to May. Allergies and asthma are a match made in heaven; both need equal importance. Keeping attune to global theme for this year 'Asthma care for all' let's take a step-by-step approach.

● **Air pollution:** 90% time spent indoors is 5 times more polluted than outdoors. In atopic patients it's like breathing through a flat straw. Monitoring Air quality index before going out, using a portable air cleaner or HVAC system filter when living in areas with poor AQIs helps. Getting rid of thick carpets, curtains, avoiding dry dusting and strong odours such as agarbati and perfumes.

undergo proper history and examination and not food allergy testing.

● **Runny rainy nose:** Not all noses require nebulisation. They require steam and efficient antihistamines. Big no to antibiotics in viral season!

● **Not easy being wheezy:** Having a written action plan for asthma, knowledge of avoiding triggers causing attacks. Avoid over-the-counter Montelukast without a doctor's advice! It's not free prasad for all.

● **Oiling the guns for the war:** Inhalers are not heritage weapons which come out during wars. They must be cleaned and discarded if change in colour. Today one-in-four kids struggle to blow a balloon due to untreated asthma. While the luxuries in life may be endless, all we need to survive is clean air, safe home and healthy food.

The author of the article is Dr Nimrat S Sidhu, MBBS, MD, FIP, FAKI.

For more info mail at: nimiratsidhu@yahoo.com or call +91284-742492. Address: Dr Nimrat's Pediatric Care, #516, Sector 10-D, Chandigarh

Disclaimer: The veracity of any health claim made in the above article is the responsibility of the hospital/doctor concerned.

With gratitude in the heart

NIMRAT S SIDHU

SITTING at the dinner table, just focused on taking a big gulp of my food, finally I get my husband to ask me, "What's wrong?"

Pleased at my own secret achievement, words blurt out before I know it, "No one calls to thank me." I remind him it is not the appreciation for food I am talking of, it's my patients who I give consultation to round the clock, while strolling in the park, at parlours, at coffee hang-outs, even birthday parties, who don't call back to thank me. The husband smiles and continues to eat.

Later, I share my feelings with my father and he tells me: 'Neki kar, koogen mein daal.' While this makes

way to my heart, I am not satisfied yet. I continue through my day and visit a close friend, a 'dog mom' as she likes to be known as. We sit and chat with the family, a true form of therapy in today's time. While speaking on the subject, our brother chips in to say, "But do you thank other people for their jobs too? Like a CA for filing your account returns, a gardener for your blossoming flowers, the maintenance guy for keeping your house clean?"

I bid them goodbye and head home, embarrassed to learn the obvious.

Do we stop to offer thanks to every job well done, or do we expect the expected? Is it a done deal for all to do their jobs perfectly well at all times? Is being an ace at your game

always a given?

Yes, doctors deserve gratitude in no small measure in this pandemic for their relentless service. Nurses and paramedics work tirelessly to support the health system. Endless hours of work in their protective kits and then going back home to hold that front as well is nothing but an achievement.

This period has definitely brought a blanket of uncertainty over many a livelihood. The servant who cooks your favourite breakfast may be facing a cash crunch, the maid who just praised your hair today was kicked out of her premises because she didn't pay rent on time, the idyllic garden where we sit and sip lemonade has been tended to by a gardener who has resorted to two meals a day to pro-

vide for a family who stays in his native village.

And your wife, your mother, who smiles and sends you off for work, silently praying about your well-being, holds the family front, plans those appealing meals at the end of her busy work day, forgetting she too needs a break every now and then.

I surely realise that two simple words, or a simple conversation asking about the well-being of the people around you even on a busy day is a source of motivation, support and gratitude for a person to do their job, and most importantly, feel gratified.

And that's when I give the old 'Neki kar koogen mein daal' saying a new twist: 'Neki kar, sabr rukh and shukar kar!'

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Guest column: What post-vax world looks like for kids



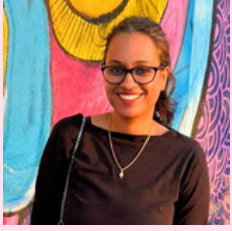
For the time being, the vaccine will protect parents while the kids patiently wait for their turn. (HT File)

By Dr Nimrat S Sidhu

May 15, 2021 IST

"Vaccines are magic." The words of our microbiology professor in the 'honeymoon phase' of medical college resonate with me all the more now that I am a paediatrician.

While the world was grappling with the novel coronavirus, scientists over the world were busy launching a defence of their own: vaccines. Much has already been said, heard and read about them,



Dr. Vaishnavi Venkatachari Iyengar

Junior consultant in
Pediatric Immunology

@Bai Jerbai Wadia
Hospital for Children.

From Stories To Research

Hello, everyone I am Dr. Vaishnavi Venkatachari Iyengar, am glad to share my journey with all of you. I extend my heartfelt thanks to the editors for giving me the opportunity for the same.

Reflecting on my early years, I am reminded of my grandmother's stories about the transformative power of education and the importance of serving others. It was my grandmother who inspired me to become the first doctor in my family.

My mother, who holds a Master of Science degree in organic chemistry, profoundly influenced my academic journey. Her story of dedication and perseverance in the face of numerous challenges served as a beacon, fuelling my own ambitions and dreams. Growing up in a middle-class family, financial constraints were a reality we constantly faced. However, my parents never let these challenges deter them from supporting my education. They prioritized my studies above all else, ensuring that I had the resources and support I needed to excel. Their commitment to my education reinforced the importance of hard work and perseverance.

My formal medical journey began when I completed my MBBS in 2009 from BJ Government Medical College, Pune. These formative years were not just about academic learning; they also instilled in me the values of empathy, compassion, and the importance of patient-centered care. This foundational experience set the stage for my further specialization.

In 2012, I earned my MD in Pediatrics from Seth GS Medical College, Mumbai. These years were critical in shaping my approach to medicine, providing me with a robust understanding of pediatric care. The MD program was demanding, but it equipped me with the skills and knowledge necessary to diagnose and treat a wide range of pediatric conditions. The hands-on experience during this period was invaluable, allowing me to develop a deep understanding of the unique challenges faced by pediatric patients and their families.

Following my MD, I embraced the role of Assistant Professor at Smt. Kashibai Navale Medical College in Pune. I spent seven years there, a period marked by both professional growth and personal milestones. This role offered me the opportunity to teach and mentor medical students while continuing to expand my clinical expertise. During this time, I welcomed my son into the world and took an 18-month break to focus on his upbringing. Returning to the medical field after this break was challenging, especially as medical advancements had continued at a rapid pace. However, my commitment to lifelong learning helped me bridge the gap.

I dedicated myself to staying updated through medical journals, conferences, and online courses, ensuring that my knowledge and skills remained current. With the support of my colleagues and family, I managed to find my footing once again. The experience of balancing my career with motherhood taught me resilience and time management.

Despite nearly a decade away from student life, my passion for learning never waned. I discovered my true calling in clinical immunology, captivated by the complexities of the immune system and its interactions with infections and autoimmune diseases. This newfound passion led me to pursue a fellowship in pediatric immunology at Bai Jerbai Wadia Hospital for Children, Mumbai, a decision that profoundly influenced my career trajectory.

Relocating my family from Pune to Mumbai for this fellowship was a significant upheaval. It required a great deal of adjustment and sacrifice, particularly from my husband. His unwavering support and encouragement were instrumental in helping me achieve my potential. He managed the myriad challenges of our relocation and family life, enabling me to focus fully on my demanding fellowship. His belief in my dreams and dedication to our family provided the solid foundation I needed to succeed in this next phase of my career.

Currently, I serve as a Junior Consultant in pediatric immunology at Bai Jerbai Wadia Hospital for Children, Mumbai. My role involves a delicate balance between clinical practice and extensive research. Our dedicated team, comprising three full-time clinical immunologists and three full-time support staff, has enabled us to conduct clinical trials and provide comprehensive care for over 1,000 diagnosed cases of children with primary immune deficiencies.

Additionally, our bi-weekly outpatient consultations cater to more than 150 cases each month. At Bai Jerbai Wadia Hospital, I am privileged to work with a dedicated team that shares my commitment to excellence in patient care and research. Our collective efforts have led to significant advancements in the diagnosis and treatment of primary immune deficiencies.

In 2024, I was honored with the Young Investigator Award at the APSID JSIAD meeting in Tokyo. This recognition affirmed the hard work and dedication of our team. It serves as a milestone in my career, motivating me to continue striving for excellence and contributing to the field of immunology.

Research has always been a cornerstone of my career. I believe that our clinical education often overlooks the importance of research. It should not only be encouraged but incentivized, with protected time allocated for research alongside clinical duties. My mentor, Dr. Mukesh Desai, has been instrumental in this regard, leading by example and fostering a culture of inquiry and innovation. His guidance has been invaluable, helping me navigate the challenges of combining clinical practice with research.

Looking ahead, there is still much to achieve. My goal is to forge more collaborations with fellow researchers to enhance the quality and impact of our research. By expanding our network and sharing knowledge, we can drive significant advancements in clinical immunology and improve patient care.

My journey, from inspired beginnings to becoming a clinical immunologist, is a testament to the power of dedication, continuous learning, and the support of mentors, colleagues, and my family. I hope my story inspires others to pursue their passions and contribute meaningfully to the field of medicine. There are miles to go, but the path is as rewarding as it is challenging, and I look forward to every step of the way.

FUN WITH CREATIVITY



From Stethoscope to Studio :

Dr Sarvamangala

B.Sc MBBS MD DCH
Retd Professor of Paediatrics BMC

In the fast-paced world of medicine, finding moments of joy and creativity can be challenging yet essential. Dr. Sarvamangala, a distinguished pediatrician and a beacon of inspiration, brings together fellow women doctors to celebrate and share their creative pursuits.

Through activities such as Bharatanatyam dance, art, Ikebana, and even table tennis, she fosters a community where medical professionals can unwind, express themselves, and find balance. She has won many prizes for her oil painting “Made For Each Other”

Her contributions to the field of pediatrics and her multifaceted talents were recognized when she was honored as a Distinguished Alumni by Bangalore Medical College in 2021.

She leads life by demonstrating that creativity and fun are essential components of holistic well-being. We feel proud to share some of her artwork.



Onset of monsoon rains



Priceless mother's love



Love you baby



Be like a queen



Romance in Air



Dr. Mridula A.M

DCH, MRCPCH,
Fellowship in Neonatology,
Paediatrician &
Neonatologist
ESIC Medical college &
Model hospital,
Bangalore
Email :
mridu_doc@yahoo.com

Beauty Battles

A brief Biosketch : Dr Mridula A.M is a paediatrician by profession and a writer by passion. She actively writes in her blog, My Magazine, accessible at mridula81wordpresscom.wordpress.com. Her book “30+ everything” is a collection of articles about life of a woman in her thirties. Many of her articles, short stories and poems are published in news paper, journals and online magazines.

Women are born warriors. Day in and day out we fight battles. Firstly there is the battle of understanding and living in this perplexing cauldron of hormones called the female body and then the battle of juggling between our nurturing instincts and our new-found career goals.

Once we tend to get a hold on those, there arrives the battle to establish domestic superiority with the ‘other’ woman in the household, the ‘woman in law’ along with incessantly fighting with the men in the world, either the unruly auto driver or the cheating vegetable vendor or the egoistic male colleaguesso on and so forth. These battles continue all life. But there is one war that we constantly fight with something intangible. It is the battle against time, struggling to stay young. I call this anti-ageing fight, the beauty battles. Ageing, after being born, is inevitable, just like how receiving the same forward in a dozen different groups is karmically inevitable after downloading what’s app. It is the truth of existence. Yet we all fight in vain to stay frozen in time.

I began my beauty battle sometime in my early thirties. The skin had by then turned several shades darker and had developed deeply etched proofs of acne episodes. The ageing process had just set in and I knew I had to start the fight to somehow delay it.

My first line of attack was by using home remedies. Someone had opined that lemon clears post acne pigmentation. Going by that advice, every time I squeezed off a lemon into my Upma or lemon rice, I rubbed the inside of the left over peel onto the blemishes on my face. Lemon being inherently sour, burnt my skin. Having been retrieved from the fridge, the juice felt uncomfortably cold and it's pulpy remnants scattered all over my face made me look like a scare crow. The blemishes however persisted. To put up a stronger fight, I visited an exotic beauty parlour .

After some painful plucking of eyebrows and merciless digging out of black heads, a face massage was offered. Facial seemed like fun. I loved it for I got to snooze away in AC on a hot afternoon with two cucumbers slices cooling my eyes. This battle was indeed enjoyable but I lost it for when I returned home after paying a fortune, I realised that the spots and craters had become more obstinate. Also, a brand new crop of acne had punctually arrived a day later. I gave up on the skin.

I , however, kept fighting the other fierce battle, 'The battle of black hair' without surrendering. On a fine morning in the late thirties, like a lighting bolt , a strand of silver hair had glistened on my head .

It had caught me off guard. The grey hair had since then kept increasing in number and shine, posing the grave risk of being labelled an 'Aunty' or even an 'Ajjii'(grandmother). That thought had disturbed me for days . Kali or peeli mehndi I realised were going to be temporary cover ups. Finding no other way to fight, I decided to enter into a treaty with it. Thankfully, though grey hair dampened the looks, it had the power to make one appear wiser than they actually were. So, I struck a deal. The grey hair now makes me look more mature without having to be so and I, in turn, don't colour it and let it be. It is a win-win.

Just when I thought that I had made peace with Mr Grey hair and moved on, there arrived his cousin, the notorious "Hair fall". He was well equipped with a strong family history and associated deficiencies. I rushed to the dermatologist. After a detailed analysis, she announced that the pattern of my hair loss was genetic and was inevitable. There was however a small ray of hope with the PRP.

Though the term PRP sounded simple, it was a dreadful procedure. Rightly called the 'vampire facial', it involved sucking out 20 ml of my own blood at every sitting and injecting the centrifuged platelet rich plasma into my scalp. I underwent the torture every month for an year. With tiny stabs of an insulin syringe, the rich yellow potion was planted at fifty different spots on my scalp. My head only grew sore and stingy after every such treatment. Nothing else ever sprouted. The hair thinning continued.

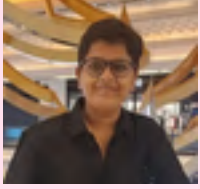
The chin in the meantime, for having been ignored all this while, had decided to double itself up and show off and the abdominal muscles had chosen to merrily meet up and have a fun 'get-together'. My face now looked like an apple and the belly, a pear. It was time to exercise.

In my forties now, I have understood the futility of these fights. I have put up my white flag. I now work on ageing gracefully. I smile at the glint of silvery shine in my hair and cover up the balding scalp with new hairstyles. I make up for the wrinkles with the glow of contentment in my eyes and I hide the blemishes with a sweet smile. It works most of the time and I like what I see in the mirror every morning.

But it is in the evening, when I come back home, tired, after a hectic day at work that the real magic happens. I see that my daughter's face lights up and my husband's eye sparkles as they welcome me. That is when I feel, truly beautiful !

I win in the most important arena, in the circle of love !

YOUTH SHINE : MENTAL HEALTH ISSUES IN ADOLESCENTS



*Avieshai
Robinson*

Mental Health Issues can be caused by the following factors - Change in our daily lifestyle, increase in stress, change in our diets (due to addition of preservatives and increase in consumption of packed foods), change in lifestyle like shifting to long screen times, excess use of technology and less time spent on outdoor activities, peer pressure, parental stress about studies and exams. Therefore, due to these factors Mental Health Issues and stress levels have increased in adolescents globally.

I would also like to express my thoughts on how as an adolescent, I not only face issues faced by other adolescents and teenagers but also issues that are related to my health. Being a Post Liver Transplant Patient, I was suffering from a disease called LCH (Langerhans Cell Histiocytosis) which is a cancer like condition that affects the Liver which can be treated by Chemotherapy and soon after finishing with my Chemotherapy sessions, I had to go through a Liver Transplant at the age of 6.

The point that I'm trying to put across is that while going through this treatment, there used to be frequent visits to the doctors, a lot of precautions to take, as requested by the doctors and parents. My mom and dad were always very supportive and caring towards me during the treatment.

I lost my Father in May 2021 and since then I have seen my mom going through a lot of hardships and the newfound single parenthood was difficult for her to adjust to and losing my dad was quite a painful experience for me and my mom, but I revered my mom when I used to see her working through those problems and hardships even though there wasn't much that I could do to help her or make her feel better and I used to feel helpless, thinking that I can't do anything my stress levels increased.

My stress would only increase, thinking about the high medication bills that she is paying for me, the loss of a parent, seeing her work so hard and trying to meet her expectations by studying well. In the midst of all these problems, I feel like I need someone who can talk to me and ask about my Mental health and not just my Physical health.

I was intrigued when Dr. Neelam Mohan, a Liver Transplant Physician and Pediatric Hepatologist at Medanta: The Medicity, who is not only my doctor who provided the accurate treatment to treat my condition but also my Mentor, asked me about what I have to say about Adolescent Stress and Mental Health problems and being a Adolescent and a Post Liver Transplant patient what I'm going through and I thought I could be the voice for all those Adolescents out there who have gone through solid organ transplant or suffering from chronic diseases in the Liver and Kidney or Adolescents suffering from joint problems and other immune-deficiency diseases.

They have to go through frequent Hospital visits and I understand their pain and empathize with them having dealt with similar situation. I took this opportunity to be a Voice for all those Adolescents of my age/younger who have a Medical History.

While everyone is concerned about the increasing Stress and Mental Health Issues of normal Adolescents, I think it's time that people should recognize and come forward to listen and understand our problems and take steps to encourage us. One solution to help such children would be to recognize their abilities in various other skill sets – perhaps music, painting or any other form which they are good at and grading them similarly.

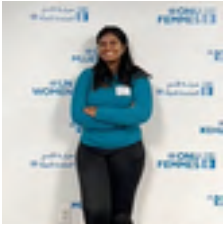
I'm not referring to a Direct Reservation but as we understand that we allocate points for deprived people in quotas. I don't want to sound like a sympathy seeker nor do I see myself or other Adolescents with a Medical Background espousing similarly, but I do think that we deserve a little margin for all the things that we have missed out in life due to our Medical History.

Therefore we can be provided with little bit of leniency as due to our Medical Background we are unable to invest time and effort in sports and there is a sports quota in universities where students who are not very good in studies are still offered admission on the basis of their ability in a particular sport but we are at a disadvantage as our conditions don't allow us to naturally be in the open in close quarters with other people.

So here I am trying to be a voice for all Adolescents with a Medical Background, highlighting if something can be done to help us out as well?

My Mentor **Dr.Neelam Mohan** helped in penning down my thoughts on this Issue.

INTRODUCING THE WPF YOUTH EDITORIAL BOARD



Dr. Harshita Umesh

Dr. Harshita Umesh is a former Youth Policy Champion for Sexual and Reproductive Health Rights (SRHR) at YouthKeBol Coalition at YuWaah, GenU at UNICEF India and is the co-contact Point of the Health Working of YOUNGO, UNFCCC. She is also a youth advisor to the Children, Cities and Climate Action Lab at the London School of Health and Tropical Medicine (LSHTM). A research enthusiast, and certified public health and disaster medicine trainer, she is a strong advocate for mental health, SRHR and climate change and has been a delegate and speaker at numerous UN conferences: the Global Forum for Adolescents, COP28 UAE and the 68th Commission of the Status of Women among others.



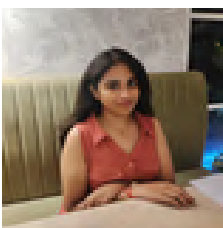
Dr. Sanath Savithri

Nandeeshan just completed his MBBS at Karnataka institute of medical sciences, Hubli. He is the recipient of Best Outgoing student award, 2018 batch. He is also the National Vice president of International fraternity for medical sciences (IFMS) and state director for Research, Global Association of Indian medical students (GAIMS) Karnataka. He is a Research enthusiast and has 5 publications in reputed international journals including Current problems in cardiology. He wants to pursue his residency in Internal medicine and a fellowship in Cardiology in the USA.



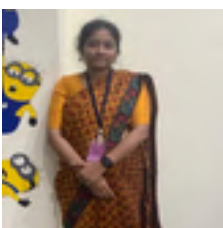
Jyothirmayee Swaminathan

Jyothirmayee Swaminathan is a fourth-year medical student from Madras Medical College, for whom pediatrics is a true calling. She is conducting extensive research in pediatrics, possesses a strong academic background, and was awarded the Dr. VVR Gold Medal for Pediatric Surgery. Growing up as a child enamored with the written and spoken word, she successfully revived her college's Literary Club - La Litt ratie - last year. She has served as the Literary & Editorial Secretary in both college and high school student councils, proficiently leading teams to produce extremely creative publications. She's a professional Bharatanatyam dancer, blogger, orator, debater, and poet committed to humanizing medicine and excited to go the extra mile to catalyze creativity in WPF's Youth Editorial Board.



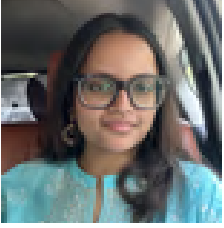
Vijayarshini

Vijayarshini is a CRMI at Madras Medical College. She was the General Secretary in her college during her 3rd year of MBBS. She is an active participant in various organisations, keen in improving her skill set. Varshini is a research enthusiast. She worked in a radio station for 6 months. Her favourite hobby is reading which has helped her hone her writing skills. She loves working with children and is hoping to become a Pediatrician in the future.



Priyanka Reddy

Hello everyone! My name is Priyanka and I am an intern, currently doing my MBBS at Madras Medical College, Chennai. My interests lie in the field of social and preventive medicine. In my free time, I enjoy reading novels and crocheting. As an avid reader since childhood, and a believer in the power of the written word, I look forward to being a part of the Media Committee of youth editors for WPF.



Divya Verma

Hi everyone! I'm Divya. I'm currently studying English language and literature at the University of Birmingham, and I'm very excited to be working with WPF alongside my fellow youth editors. I hope to be able to make a difference during my time here and provide for teens, the invaluable support I was fortunate and blessed enough to have growing up. As an avid reader and with my substantial experience with publishing, editing and content writing, along with working for an NGO working towards menstrual awareness and relieving the taboo around the subject, i hope to be able to make the most of this opportunity and be a good addition to the team. Can't wait to get started!



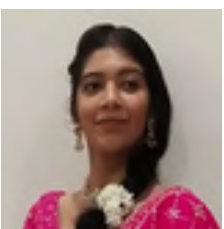
Sandeep Babu

I'm Sandeep Babu, from Kerala, and I'm currently pursuing my IPM course From Indian institute of management Jammu. Even though I was born in kerala, I spent most of my life in Mumbai, where I was also an editorial intern (Student correspondent) for Times of India's Student Edition (Times Nie). I have written poems, travelogues, and other kinds of writings for the same too, making me a versatile and an creative writer. Here at IIM Jammu, I'm a member of Ānandam, the centre for happiness, and I work for creating a better environment for all the students and faculties so that they can bring the best out of them and be a better self of themselves everyday. I look forward to working with others in this board and i hope it becomes an enriching experience for me.



Sanjana PB.

Hello everyone! I'm Sanjana PB. I'm an academic person and I have always wanted to contribute to society's well-being. I have been into writing for a very long time. I have written numerous articles, reports, essays, speeches, and research papers for my school, and other competitions and won many awards at the national and state levels. I wrote a comprehensive research paper on 'Mental Health Of Working Mothers' after conducting a survey and getting responses from about 300 working mothers. I love reading, writing, music, singing, playing the piano, and coding in my leisure time. I strive to make a positive impact on society. I'm a huge advocate for gender advancement and mental health. Being a youth editor at WPF has given me the opportunity to combine two of my most treasured passions - writing and gender advancement - and I'm very excited to start my journey here.



Thaneeksha Karanth

In very brief terms, student, chronic bookworm, dancer (when the elusive mood strikes), writer (when the even more elusive 'inspiration' strikes) and not very good at introductions. For anyone who stuck around to read the rest, I'm someone who talks a lot, somehow thinks too much and too little at the same time- don't worry, I like it- and someone who is in love with words. A bit strange, a bit of rationality and lots of tea, that's what I am. I would love to put it down to reading too much fiction, but let's be honest, that's just who I am.

GOA CONCLAVE

Team WPF under leadership of Chairperson Dr Sangita Lodha successfully organised 1st Annual WPF Goa Conclave 2024 on the 12th, 13th, and 14th of April. The event was successfully organized by a dedicated team comprising:

- Chief Organising Chairperson- Dr. Madhu Raturi
- Organising Chairperson: Dr. Himabindu Singh
- Organising Secretary & Chairperson WPF: Dr. Sangita Lodha
- Scientific Chairperson: Dr. Elizabeth K.E.
- Scientific Co-Chairs: Dr. Asha Benakappa and Dr. Neelam Mohan
- Reception Committee -Dr. Prabha More

The inaugural session was marked by the launch of the WPF website by Dr. Swati Bhave (<https://wpfindia.org/>). Dr. Sangita Lodha then led an engaging quiz, adding an exciting touch to the conclave. The event was a refreshing and unique experience, with its commendable focus on holistic well-being, work-life balance, and cultural expression, all intertwined with scientific sessions. The presence of distinguished figures such as Dr. Swati Bhave, Dr. Madhu Raturi, Dr. Elizabeth, Dr. Asha Benakappa, and Dr. Sangita Yadav was particularly inspiring for the young women pediatricians in attendance.

Dr. Sangita Lodha truly shone as the star of WPF. Her enthusiasm, dedication, hard work, meticulous planning, and unparalleled energy were highly appreciated. The cultural event, superbly organized by Dr. Alpana Shukla and Dr. Anubha Gangrade, was a fantastic highlight.

This conclave brought together leading professionals to share and explore key pediatric topics. With 135 women pediatricians from across India participating, the event featured enriching discussions on holistic well-being and eco-friendly lifestyles.

The program offered a diverse mix of academic activities, including paper and poster presentations, as well as wellness sessions such as yoga, fitness routines, beach Zumba, and a live millet recipe demonstration. The academic section focussed on Holistic issues to name few Life Style Clinics Bench to Bed side, Mediation is Medication, Controlling Anger and Emotional Outbursts.

Few topics specific to the girl child, like, protection from abuse ,opportunities for girls etc were specially discussed. Notably, Dr. Chhaya Prasad, Dr. Amita Sinha, Dr. Prajka Kaduskar, Dr. Shubhda Khirwadkar, and Dr. Sulbha Amol Pawar actively participated in the scientific deliberations. Additionally, strategies for advancing our previous modules were explored by Dr. Chaya Prasad, Dr. Saghmitra Panda, Dr. Ruchira Gupta, and Dr. Laxmi Shanti."

Cultural programs showcasing regional dance performances and a ramp walk added to the lively atmosphere. As someone aptly remarked, "It was an absolutely informal evening cultural blast where everyone danced like a child—दिल तो बच्चा है जी."

Last but not the least, during the conclave, the inaugural issue of the Official Publication of WPF, "We Connect," was launched by our stalwarts and OBs/EBs of WPF. A heartfelt appreciation goes to Dr. Preeti Galagali, Dr. Poonam Bhatia, Dr. Himabindu, and the entire publication team who have worked tirelessly day and night to ensure that our first issue is nothing short of the best.

WOMEN PEDIATRICIANS FORUM
YEAR - 2024-25

Dr. Himabindu Singh
Founder Chairperson

Dr. Sangita Lodha
Chairperson

Dr. Elizabeth KE
Vice Chairperson

Dr. Anuradha Sanadhya
Hon. Secretary

Dr. Shreelekha Joshi
Jt. Secretary

Women Pediatricians Forum
Women Pediatricians Conclave 2024

Organized by Women Pediatricians Forum 12 13 14
APRIL 2024

SCIENTIFIC PROGRAM

FRIDAY, 12 APRIL 2024

Time	Topic	Speaker
12:00 - 2:00	Registration	
	SESSION INCHARGE - DR. NARMADA ASHOK	
02:00 - 5:00 pm	PAPER AND POSTER PRESENTATION	
	WPF Chair Person	Dr. Narmada Ashok
	Co-Chair	Dr. Meenakshi Verma
	Convener	Dr. Chitra Kulkarni, Dr. Neelam Nimare
06:00 - 7:00 pm	SESSION INCHARGE - DR. HIMABINDU SINGH	
	National Consultative Meet - Present Status of The Girl Child & Recommendations	
	Scientific Chair	Dr. Himabindu Singh
	Scientific Convener	Dr. Sushma Desai
	Editors & Reviewers	Dr. Rishmi Divedi
		Dr. Anil Kulkar, Dr. Ganesh Singh, Dr. Pragati Khalkar
	Topics	
	Importance Of Girl Child	Dr. Sangita Lodha & Dr. Preeti Mahotra
	Female Feticide	Dr. Sonali Bhatt & Dr. Sonali
	Transgenerational Cycle	Dr. Rupal Desai & Dr. Vidya Patil
	Girl Child Nutrition	Dr. Gupta & Dr. Sharmila
	Anemia	Dr. Ramya & Dr. Dakshayani
	Girl Child Education & Career	Dr. Subha Parar & Dr. Manjusha Shankar
	Protection from Abuse	Dr. Shubhadra Khawdar & Dr. Pooja Shivali
	Opportunity & Rights	Dr. Uma Nayak & Dr. Anita Patil
	Adolescent Girl Challenges	Dr. Indumati & Dr. Shalini Agasthi
	Teenage Pregnancy	Dr. Lalitani Shrivastava & Dr. Pragati Kulkar
	Inspire Inclusion	Dr. Neha Agrawal & Dr. Anura K
	Adolescent Vaccination	Dr. Chhaya Prasad & Dr. Anita Sinha
07:00 - 8:30 pm	Inauguration & GBM of Women Pediatricians Forum	Dr. Sushma
08:30 - 10:00 pm	Dinner Followed by Karaoke	Dr. Sangita Lodha

WE Connect

Women Pediatricians Conclave 2024

Organized by Women Pediatricians Forum

12 13 14
APRIL 2024

VENUE
Goswami Grand Resort
Near Football Ground
Candolim Beach

Women Pediatricians Forum
Women Pediatricians Conclave 2024

Organized by Women Pediatricians Forum 12 13 14
APRIL 2024

TEAM OF WOMEN PEDIATRICIANS FORUM 2024-25





ZONAL ACTIVITIES

Report: May 2024 Events and Training Sessions

ASSOCIATION OF ADOLESCENT AND CHILD CARE IN INDIA
EDUCATIONAL PROGRAM

ToT on DEALING WITH PUBERTY & MENSTRUAL HEALTH

Date-30/04/24 & 01/05/24

Time 3:30 - 5:00 pm.

TOPICS & SPEAKERS

DATE	DAY	TIME	TOPIC	NAME OF SPEAKER
30th APRIL 2024	TUESDAY	30 Minutes	PUBERTY FOR PARENTS & TEACHERS	DR. DEEPA PASSI
30th APRIL 2024	TUESDAY	30 Minutes	PUBERTY FOR SCHOOL CHILDREN	DR. ZALAK SHAM UPADHYAY
30th APRIL 2024	TUESDAY	30 Minutes	UNDERSTANDING ADOLESCENT MENSTRUATION & RELATED ISSUES	DR. GURMEET
1st MAY 2024	WEDNESDAY	40 Minutes	MENSTRUAL HYGIENE	DR. SUCHETA BACHHAV
1st MAY 2024	WEDNESDAY	30 Minutes	AUB	DR. SUNITA MANCHANDA

Moderator: Dr. Ramya, Dr. Samiksha Sharma

Team WPF: Dr. Himabindu Singh (founder Chair), Dr. Sangita Lodha (Chairperson), Dr. Anuradha Sanadhya (Hon. Secretary), Dr. Elizabeth KE (Chairman), Dr. Shreelekha Joshi (Jt. Secretary), Dr. Narmada Ashok (Treasurer)

Faculties: Dr. Deepa Passi, Dr. Zalak Upadhyay, Dr. Gurmeet, Dr. Sucheta Bachhav, Dr. Sunita Manchanda

1st May 2024 - Training of Trainers (TOT) on Dealing with Puberty and Menstrual Issues

Day 2 Topics:

Menstrual Hygiene: Presented by Dr. Suchita Bachhav, this session focused on the importance of maintaining proper menstrual hygiene, educating the participants on best practices and common issues faced during menstruation.

Abnormal Uterine Bleeding (AUB): Dr. Sunita Manchanda discussed the causes, diagnosis, and management of AUB, providing practical insights for better patient care.

WOMEN PEDIATRICIANS FORUM
YEAR - 2024-25
Mystery of Millets

founder Chair: Dr. Himabindu Singh

Chairperson: Dr. Sangita Lodha

Hon. Secretary: Dr. Anuradha Sanadhya

Vice Chairman: Dr. Elizabeth KE

Jt. Secretary: Dr. Shreelekha Joshi

Treasurer: Dr. Narmada Ashok

Guest of Honor: Dr. Madhu Raturi

Speaker: Dr. Priyanka Udawat

11.00-12.15pm

5th May 2024 - Learning Facts and the Mystery of Millets

Speaker: Dr. Priyanka Udawat
Guest of Honor: Dr. Madhu Raturi

This interactive session delved into the various types of millets available in India, their nutritional benefits, and their importance in women's health. Participants learned about the role of seeds in a balanced diet, how to identify different millets, and their health advantages. The session also included practical demonstrations on preparing millet-based breakfasts and salads, emphasizing their ease of use in daily meals.

25th May 2024 - Face to Face: Faculty and Residents Meeting

Faculty:* Dr. Alka Singh, Dr. Sara Dhanawade, Dr. Monika Sharma, Dr. Anubha Srivastava, Dr. Chandrakala Bs

****Residents:**** Dr. Ayushi Sharma, Dr. Aishwarya Sindhur, Dr. Divya Sharma, Dr. Srivani, Dr. Bhavna, Dr. Atulya, Dr. Manasa, Dr. Nivedita, Dr. Sadhana, Dr. Jyothi Choudhary, Dr. Anjuman Mansuri

****Mentors:**** Dr. Thrishi, Dr. Alpa Gupta, Dr. Prarthana Kharod, Dr. Leena Das, Dr. Neetu Beniwal, Dr. Indumathy

This meeting facilitated an open discussion between faculty and residents about the current curriculum, the challenges faced in the residency program, and future career options for postgraduates in pediatrics. The conversation also covered essential skills such as communication, time management, prioritization of tasks, and managing stress in high-pressure situations.

TETE A TETE EPISODE - 3

WOMEN PEDIATRICIANS FORUM
YEAR - 2024-25
Team WPF

Dr. Himabindu Singh founder
Chair

Dr. Sangita Lodha WPF
Chairperson

Dr. Anuradha Sanadhya
Hon. Secretary

Dr. Elizabeth KE Vice
Chairman

Dr. Shreetekha Joshi
Jt. Secretary

Dr. Narmada Ashok
Treasurer

TETE A TETE - Episode 3

Guest Speaker
Dr. Sandhya Khadse

Topic- JOURNEY OF MILK BANK IN INDIA

Date -31/05/2024
Time-3:00 - 4:30 pm

Dr. Shailaja Mane
Moderator

On May 31, 2024, , the WPF organized with the topic *Journey of Milk Bank in India. The session featured the Legendary Guest Speaker, Dr. Sandhya Khadase, whose pioneering work in establishing Mother's Milk Banks has been a significant milestone in the field. The discussion was expertly moderated by Dr. Shailaja Mane.

Human milk banks offer crucial support for mothers who are unable to breastfeed their babies due to various reasons. This session highlighted the evolution and significance of human milk banks in India. Dr. Khadse described milk banks as a divine resource for mothers unable to breastfeed their babies due to various reasons. The discussion covered the necessary criteria for donors, the requirements for establishing a milk bank, and the numerous benefits these banks provide to infants and mothers alike.

These sessions and meetings throughout May 2024 fostered valuable learning and provided crucial insights into key topics, advancing the knowledge and skills of all participants involved.

MEDITATION & YOGA IS MEDICATION

Meditation and Yoga are Pathways to Inner Peace and Well-Being, Since ancient times, these practices have been used to promote physical, mental, and spiritual well-being. Meditation & Yoga have roots in ancient Indian traditions and have been adapted and embraced worldwide for their holistic benefits. Together, they can lead to a more balanced and fulfilling life. Embracing these practices can pave the way to inner peace, resilience, and overall well-being.

WOMEN PEDIATRICIANS FORUM
YEAR - 2024-25

President: Dr. Himanshu Singh
Chairman: Dr. Sangita Lohia
Vice Chairman: Dr. Anuska Samalika
Secretary: Dr. Elizabeth KJ
Joint Secretary: Dr. Shreshtha Joshi
Treasurer: Dr. Namrata Ashok

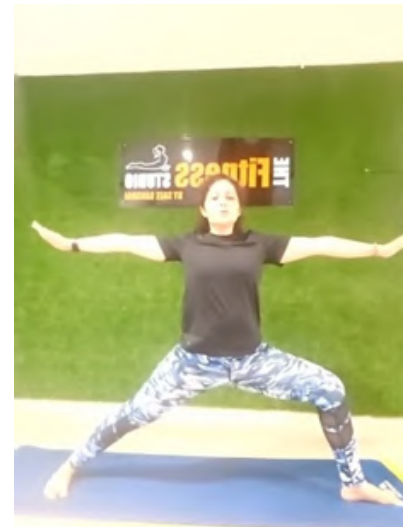
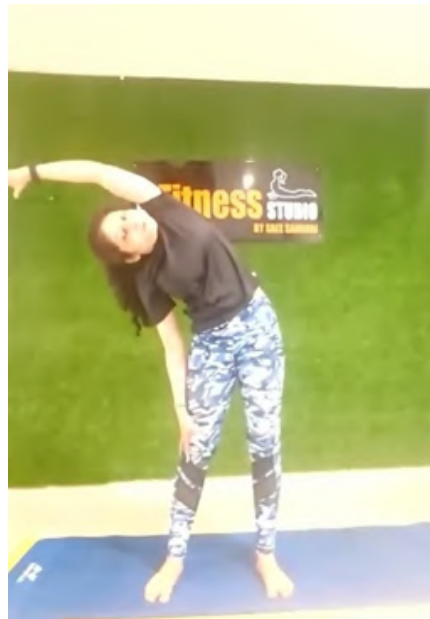
Women pediatricians forum

Meditation & Yoga is MEDICATION

Dr. Neelam Nimare
Consultant Pediatrician

Saee Sanghai
Fitness Expert

Date -09/06/2024
Time-7:00-8:00am



While juggling clinical work, academics, household responsibilities, bringing up children and grandchildren and social commitments, we tend to ignore our own health and well-being. We forget that if we are not healthy, strong and stable, all those that we hold together will fall apart. “Physician, Heal Thyself“, but it’s better to care for ourselves and avoid needing to heal.

Women’s Pediatric Forum, as part of our efforts at promoting self-care of our members, organised an online session on 09.06.2024 by Dr Neelam Nimare, meditation expert and Ms Saee Sanghai, Yoga expert. The session was well attended and found to be extremely helpful to all.

WOMEN PEDIATRICIANS FORUM
YEAR - 2024-25

Team WPF

Dr Himabindu Singh founder Chair
Dr Sangita Lodha WPF Chairperson
Dr Anuradha Saradhya Hon.Secretary
Dr Elizabeth KE Vice Chairman
Dr Shreelekha Joshi J.Secretary
Dr Narmada Ashok Treasurer

TETE A TETE - Episode 4

Topic - TRIAGING & LIFE SUPPORT FOR CHILDREN - BLS & ALS

Date -29/06/2024
Time-3:00 - 4:30 pm

Guest Speaker
Dr.Piyali Bhattacharya

Moderator
Dr.Shreelekha Joshi

TRIAGING AND LIFE SUPPORT FOR CHILDREN

Dr. Piyali Bhattacharya whose work in BLS/ACLS is a milestone spoke engagingly about basic and advanced life support for children. It was an excellent refresher for those trained in triage and life support.

Dr. Bhattacharya also gave a simple and clear approach to first aid and life support for those who were untrained, giving confidence to deal with a crisis.

FINANCIAL LITERACY

Various avenues of gold investment

➤ Traditional –
Physical gold - Jewelry , coins , bars

➤ Modern –

- 1) Gold ETFs (Exchange traded funds)
- 2) Gold Mutual Funds
- 3) Sovereign Gold Bonds
- 4) Digital Gold
- 5) Gold Future and option contract

Now here, let us give some 4 thought again.

zoom

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Dr Narmada Ashok Treasurer

Webinar - FINANCIAL LITERACY

Dr.Ajoy Kumar
Dr.Harisha Gopal
Dr.Tripti Mahatme
Dr.Meenakshi Verma

Date :18/07/2024
Time :3.30 pm-5:00 pm

NSE

FEATURES

Passive Funds
Active Funds

COSTS / FEES

- Range – generally up to 0.50% of AUM
- Range: 1.5% – 2.0% of AUM

ROLE OF FUND MANAGER

- Low – investment strategy is linked to index
- High – fund manager switches investments depending on his/her

RETURNS

- In line with underlying index
- Variable – depending on judgement/skill of fund manager

Infrastructure. They do research. So they charge you one and a half to 2%.

zoom

HOW MUCH TO INVEST ?

EQUITY ALLOTMENT RULE stocktalk

(100 - Your Age) = Equity % Allocation

AGE (years)	EQUITY (Stocks, MFs, ETFs)	DEBT (Bonds, FDs, Bank)
25	75%	25%
35	65%	35%
45	55%	45%
55	45%	55%
65	35%	65%

RISK FACTOR
As you grow older, your risk tolerance naturally decreases as you will require the investment money sooner and equity usually requires long term for higher growth. Debt investments provide low level income which is robust at later stages life.

ask anybody. Don't give your money to

zoom

PROCEDURE TO SELECT A STOCK

- MPTDS criteria - Large cap stocks
- MDSPORT criteria - Mid cap and small cap stocks

Fundamental analysis
Valuation analysis
Technical analysis

So we have done a fundamental assess done

zoom

As successful women paediatricians, we are capable to earning and generating income. But how many of us know where and how and when to invest? Do we know how to make our money work for us instead of us working for money.

The Women Paediatricians Forum came up with a wonderful webinar about financial literacy. Financial literacy is the ability to understand and effectively use various financial skills, including personal financial management, budgeting, and investing. When you are financially literate, you have the essential foundation for a smart relationship with money.

Dr Tripti Mahatme, Dr Ajoy Kumar and Dr Harish Gopal talked about different ways of investing in gold, in exchange traded funds and building a stock portfolio by arming ourselves with the right information and the right tools. This is a remarkable effort by WPF to encourage members to be self sufficient and not dependent on others to manage our own money.

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TETE A TETE -Episode 5

Topic -Embracing Imperfection : The Journey Beyond Perfection****

Date -25/07/2024
Time-3:00 - 4:30 pm

Guest Speaker
Dr.Elizabeth KE

Moderator
Dr Archana Joshi

EMBRACING IMPERFECTION: THE JOURNEY BEYOND PERFECTION

Tete-a-tete with Dr Elizabeth K.E., renowned pediatrician, educationist, author and expert in nutrition, growth and development was held online on 25th July 2024. Elizabeth ma'am took us through her incredible journey so far, the challenges she faced and the accolades she won. It was a very positive conversation that should serve as an inspiration to so many. She taught us the principles of hard work producing great results and a lasting impact on all that we come across.

Best Publication, Best Doctor, Best Teacher Award
Produced 6 PhDs in the Faculty of Medicine
6 Guidelines, 6 Books & 256 Publications



Association with the 1st NRC of Kerala- Support from Dr Sachidananda Kamath

• Locally Prepared F 75, F 100 & RUTF for SAM Cases using SAT Mix, Gluten free ELIZ Mix II & Trial in the 1st NRC of Kerala at Attappadi Tribal settlement.



WOMEN PEDIATRICIANS FORUM
YEAR - 2024-25

Team WPF

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Dr. Sangita Latha WPF Chairperson
Dr. Anushree Saraf WPF Hon. Secretary
Dr. Shivani K. K. WPF Hon. Secretary
Dr. Deepshikha Jain WPF Secretary
Dr. Namrata Anand WPF Treasurer

Webinar series by WOMEN PEDIATRICIANS FORUM RAJSTHAN STATE

Topic
ANEMIA - WITH DIFFERENT PERSPECTIVES

Date-13/08/2024 Time- 3.30-5.00pm

Dr Madhu Raturi
Guest of Honour

Dr Madhu Mathur
Chairperson

Dr Kusum Devpura
Chairperson

Dr Parmeshwari Mishra
Chairperson

Dr Neha Agarwal
Ped.Nephro

Dr Pragya Somani
Ped. Endocrinology

Dr Anubhuti Bhardwaj
Ped.Gastro.

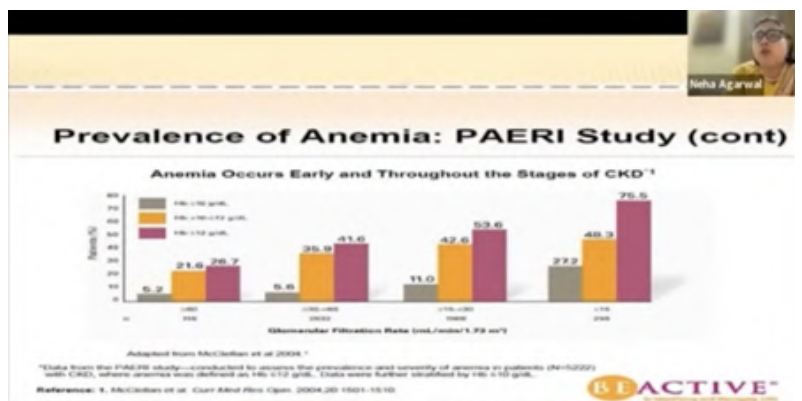
Dr Anshita Arora
Moderator

Co-moderator

ANEMIA - DIFFERENT PERSPECTIVES

Anemia is a very common problem in India and we are all trained to regularly look for it and treat it. However, there is more to it than just iron deficiency.

To bring our attention to different facets of anemia, we had a wonderful discussion with Dr Neha Agarwal, pediatric nephrologist, Dr Pragya Somani, pediatric endocrinologist and Dr Anoobhuti Bhardwaj, pediatric gastroenterologist on 13th August 2024.



Learning

"Eyes sees what the mind knows"

- Common atypical symptoms includes
 - Short stature
 - Anemia**
 - Rickets
 - Recurrent abdominal pain
 - Constipation
 - Hepatic steatosis, stomatitis, alopecia, althralgia
- Do not over-do/ under-do the diagnosis
- Seek help of an expert for any confusion

INTRODUCTION

- 1 MILD TO MODERATE
- 2 DECREASED PLASMA VOLUME MAY MASK SEVERITY
- 3 MULTIFACTORIAL



Immunisation in difficult situation

11th August 2024



Team WPF Jaipur organised a Session on "Immunization in Difficult Situations". The discussions provided invaluable insights into the critical role of proper immunization practices, particularly in patients with renal, hemato-oncological, and gastrointestinal conditions—often the most vulnerable and under-immunized populations. Dr. Madhu Raturi emphasized the latest advancements with PCV 14. The presentations by Dr. Neelam Singh, Dr. Ruchi Chaudhary, Dr. Radha Chonsariya, and Dr. Neha Agarwal were clear, concise, and impactful.

We were privileged to have Prof. Dr. Usha Acharya and Dr. Rajiv Bansal chairing the sessions, offering enlightening perspectives and key messages. A heartfelt thanks to our esteemed senior members—Dr. B.M. Raturi, Dr. B.K. Jain, Dr. Rambabu Sharma, Dr. Sushma Lala, and Dr. Parmeshwari Mishra—for their presence despite the inclement weather. The session was further enriched by the expert moderation of Dr. Lalita Kanojiya.

WPF ACHIEVERS

Dr. Elizabeth K.E.

One of the most respected names in the field of Pediatric Nutrition, is a Professor of Pediatrics and Superintendent at SAT Hospital, Govt. Medical College, Trivandrum. With 30 years of experience as a clinician, researcher, and medical educator, she has made significant contributions to the field. She graduated with first rank and gold medals in Medicine and Community Medicine from the University of Kerala and completed her postgraduation and doctorate at the same university. In 2004, she was awarded the Fellowship of the Indian Academy of Pediatrics.

Dr. Elizabeth has received specialized training from esteemed institutions, including the National Institute of Nutrition (NIN) in Hyderabad, Leeds Teaching Hospital in the UK, and Karolinska Institute in Sweden. She is the author of numerous national and international papers and textbooks and has been recognized with several honors and awards for her research and community service.

A life member of professional and social organizations such as IMA, IAP, NNF, and CMAI, Dr. Elizabeth is also a reviewer for many national journals and serves on the International Advisory Board of the Journal of Tropical Pediatrics, Oxford, London. In 2013, she was honored with the Best Teacher Award by the University Teachers Forum during the Diamond Jubilee Celebration of Catholicate College, Pathanamthitta.

Additionally, she received the Best Doctor Award from the Government of Kerala in 2014, the Best Research Publication Award from IAP Kerala in 2017, and has delivered six prestigious orations. To honor her contributions, a Gold Medal and a cash prize of Rs. 10,000 have been established in her name for the best research paper in the field of Nutrition. The inaugural award was presented to Dr. Amina Ajmal from Ananthapuri Hospital during Nutrikid 2024, the State Conference of the IAP Nutrition Chapter held in Kochi on August 11, 2024.






IAP BENGALURU



Dr. Preethi M Galagali

The Pioneer in Paediatrics
P C Bopaiah Endowment Lecture
by **Dr. Preethi M Galagali**
Society for Adolescent Health and Medicine
(SAHM), USA Awardee

Karnataka Women Achievers Awardee
Topic : The Art and Science of Adolescent Healthcare
A National and Global Perspective



15th June 2024, Saturday
11.00 am - 11.30 am



Hall - A
NIMHANS Convention Centre

ALL MEMBERS ARE WELCOME

For Registrations : <https://www.iapbangalore.org/11th-bengaluru-pedicon-2024/#register>

Dr Preethi Galagali is a trail blazer and pioneer in the field of child and adolescent health care in India. In 2005, she was amongst the first group of Indian paediatricians to be formally trained in adolescent medicine and is one of the few in the country to offer exclusive comprehensive teen health services.

She has over 100 scientific publications and delivered over 200 scientific talks including orations. In 2024, she was invited to speak at the Massachusetts General Hospital and Boston Children's Hospital, Harvard Medical School, USA.

She has brought laurels to our country by receiving the prestigious International Chapter Award 2024 from the Society for Adolescent Health and Medicine, USA, in recognition of her exceptional work in adolescent health across the Northern Hemisphere.

In addition, Dr. Galagali was honored with the Dr. PC Bopaiah Endowment Lecture Award by IAP Bengaluru for her pioneering contributions to adolescent health over the past two decades. You can watch her lecture.

https://www.youtube.com/watch?v=h0zC6An8_K8



Dr Himabindu Singh,

Professor and HOD of Neonatology, Department of Neonatology, Niloufer Hospital, Osmania Medical College, Hyderabad

She was awarded by Govt of Telangana on Doctor's Day



Dr Asha Benakappa

Head of the Department of Paediatrics at Drchandramma Dayanand sagar institute of medical education and research Devarakaggalahalli Horohalli kanakapura road Ramanagar district.

On March 11th, International Women's Day Dr. Asha Benakappa, Head of the Paediatrician Department at CDSIMER Ramanagar district in Bengaluru, received award from Bangalore medical College and Research Institute 2024


She suggests doctors to set up nutrition kiosks and lifestyle clinics instead of coming up with new hospitals. According to her “if Nutrition is Queen and Exercise is King and together we can build healthy kingdom”.




Dr. Neha Agarwal

On the 78th Independence Day Dr Neha Agarwal Associate Professor and Head Department of Pediatric Nephrology SMS Medical College, Jaipur was bestowed by two awards received a

1. Certificate of Merit from SPMCHI, Jaipur
2. Honored with the Rising Star Award on Doctor's Day by Jaipur IAP



FELLOWSHIP IN ALLERGY, ASTHMA AND IMMUNOLOGY (FAAI)
All India Institute of Medical Sciences, Rishikesh
 &
Postgraduate Institute of Medical Education and Research, Chandigarh-160012
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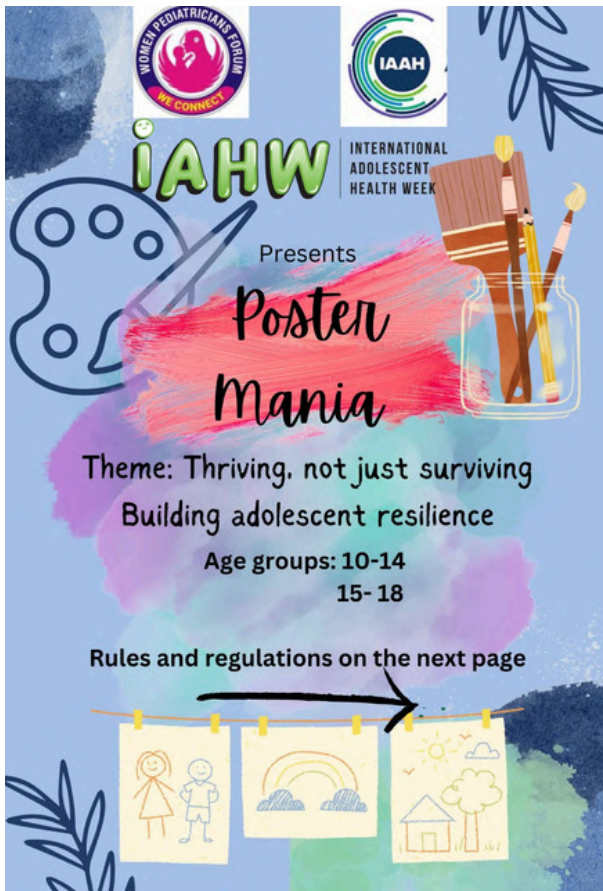
<p>Dr. Meenu Singh, MD, FIAP, FCCP Executive Director, AIIMS, Rishikesh</p> <p>Dr. P.K.Vedanthan, MD., Clinical Prof. Dept. Of Medicine, Univ. of Colorado, Denver, CO. USA.</p>	<p>Telephone: +91 0172 2756181 2756149</p> <p>Fax : +91 0172 27544401</p> <p>E-Mail : faaipgi@gmail.com</p>
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Dr. Nimrat Sindhu

Assistant Professor Adesh Medical College, Consultant Paediatrics
 Healing group of hospitals, Chandigarh

We congratulate Dr Nimrat Sandhu who was recently awarded “Fellowship in Allergy, Asthma and Immunology” from AIIMS Rishikesh. She needs applauds for securing highest marks in practical exams.

INTERNATIONAL ADOLESCENT HEALTH WEEK 2024 EVENT BY YOUTH EDITORIAL BOARD, WE CONNECT



Our Youth Editorial board along with Editorial team We Connect will be celebrating IAHW 2024 through a poster making competition.

POSTER MANIA - a poster-making competition for this year's International Adolescent Health Week (7th -13th October).

GET A CHANCE TO BE FEATURED IN OUR NEXT PUBLICATION!

Create a poster relevant to this year's theme for International Adolescent Health Week organised by the International Association of Adolescent Health (IAAH) and write about your poster in 50 words.

Theme:- **THRIVING, NOT JUST SURVIVING - BUILDING ADOLESCENTS' RESILIENCE**

Age Groups:- **10 - 14 years, 15 - 18 years**

Rules:-

1. Each participant can only submit 1 poster. (format:- jpg / png)
2. You must also submit a photo of you with your poster for proof.
3. Further instructions regarding the submission are given in the Google forms.
4. The judges' decision is FINAL.
5. Digital Art is NOT Allowed.
6. Parental Consent is required.
7. Late submissions will not be entertained.

Submit on or before 10th September:-

1. 10 - 14 years old:- <https://forms.gle/7PRSDywRo9FtZA5i9>
2. 15 - 18 years old:- <https://forms.gle/MHVqsHpGeB1GgY6H9>

There are **3 Exciting Prizes** for each category, and the winners will be featured in our IAHW Special Issue of We Connect.

If you have any queries related to the competition, contact us via email.

Email:- youtheditors.wpf@gmail.com

Let your creativity shine!

WPF SOCIAL MEDIA PROFILES

WPF TELEGRAM PAGE

[HTTPS://T.ME/JOINCHAT/R4FRAFLOIR4LMZUC](https://t.me/joinchat/R4FRAFLOIR4LMZUC)



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WPF MAGAZINE -WE CONNECT

OFFICIAL PUBLICATION OF WOMEN PEDIATRICIANS FORUM QUARTERLY MAGAZINE



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